Case 16-39856	Doc 1	Filed 12/20/16 Document		ed 12/20/16 10:15:33 1 of 62	Desc Main	
Fill in this information to identify y. United States Bankruptcy Court for the Northern District of Illinois Case number (If known):		Chapter you are filing Chapter 7 Chapter 11 Chapter 12 Chapter 13	g under:	Of 62 P I L UNITED STATES BANK NORTHERN DISTRICT DEC 20 2 JEFFREY P. ALLSTEA	101s	
Official Form 101 Voluntary Petitic	on for	· Individua	ls Fil	ling for Bankrı	J	2/15
The bankruptcy forms use you and D joint case—and in joint cases, these the answer would be yes if either deb	iomis use v	OU to ask for informatio	n from hot	h debtore For evenuele if a face		35

а ar," Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	atilitic Identify Yourself		
•	Your full name	About Debtor 1;	About Debtor 2 (Spouse Only in a Joint Case):
T.	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	LETISHA First name DOMINIQUE Middle name HARRIS Last name	First name Middle name Last name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	XXX - XX - 2 8 9 8 OR 9 xx - xx -	XXX - XX - OR 9 XX - XX -

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	DOMINIQUE HARRIS E Name Last Name	Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years Include trade names and	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	178 LAURA LANE Number Street	Number Street
	CHICAGO HEIGHTS IL 60411 City State ZIP Code	City State ZIP Code
	COOK County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	N/A Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing this district to file for	Check one:	Check one:
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1

LETISHA DOMINIQUE HARRIS

Case number (if known)_

	Tell the Court Abo	out Your	Bankrup	ptcy Case			
7	The chapter of the Bankruptcy Code you	Check for Ban	one. (For kruptcy (f	a brief description of ea Form 2010)). Also, go to	ch, see Not	tice Required by 1 page 1 and check	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.
	are choosing to file under		apter 7				
		☐ Chi	apter 11				
-		☐ Cha	apter 12				
A1809 A	MENTER THE MENTER WAS ARRESTED FOR THE SECOND SECON	🔲 Cha	apter 13				
8.	How you will pay the fee	ioca you sub with I ne App I red By I less pay	rself, you mitting you a pre-pred to pare the aw, a jude the fee i	or more details about u may pay with cash, /our payment on your vinted address. ay the fee in installing for Individuals to Paymat my fee be waived dge may, but is not re 10% of the official povential of the payment my fee of the official povential may be the payment my fee be waived the official povential may fee be waived the official povential may be the payment my fee be waived the pay	cashier's behalf, you ments. If you may quired to, erty line the choose the	may pay. Typica check, or money ur attorney may bu choose this of Fee in Installmed request this opwaive your fee, at applies to you is option, you mis option, you may check the characteristics of the chara	neck with the clerk's office in your lly, if you are paying the fee of order. If your attorney is pay with a credit card or check option, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter 7, and may do so only if your income is sur family size and you are unable to must fill out the Application to Have the with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.				MM / DD / YYYY	Case number
			District		When	MM / DD / YYYY	Case number
			District _				Case number
18,	Are any bankruptcy cases pending or being	☑ No	The last transfer on a second sec				
	filed by a spouse who is	Q Yes.	Debtor		· t		Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?		District _		When	MM / DD / YYYY	Case number, if known
			Debtor _				Relationship to you
						MM / DD / YYYY	Case number, if known
11.	Do you rent your	Ø No.	Go to line	e 12,			

residence?

residence?

No. Go to line 12.

this bankruptcy petition.

Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your

☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

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De	btor 1 LETISHA D First Name Middle Nam	OMIN	IQUE HARRIS Case number (# known)	
P	11 33 Report About Any I	Busines	sses You Own as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time	☑ No.	. Go to Part 4,	
	business?	Yes	s. Name and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as		Name of business, if any	
	a corporation, partnership, or LLC.		Number Street	
	If you have more than one sole proprietorship, use a separate sheet and attach it			
	to this petition.		City State ZIP Code	
			. Side	
			Check the appropriate box to describe your business:	
			Health Care Business (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
			Stockbroker (as defined in 11 U.S.C. § 101(53A))	
			Commodity Broker (as defined in 11 U.S.C. § 101(6))	
	THE STREET OF THE STREET STREE		None of the above	
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	most re	are filing under Chapter 11, the court must know whether you are a small business debtor so that it appropriate deadlines. If you indicate that you are a small business debtor, you must attach your exent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).	***************************************
	For a definition of small	☐ No.	I am not filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.	
		Yes.	. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Pai	i 49 Report if You Own o	r Have	Any Hazardous Property or Any Property That Needs Immediate Attention	
	Do you own or have any	☑ No		
	property that poses or is alleged to pose a threat of imminent and	🖸 Yes.	What is the hazard?	
other other	dentifiable hazard to public health or safety? Or do you own any property that needs mmediate attention?		If immediate attention is needed, why is it needed?	
ļ	For example, do you own perishable goods, or livestock hat must be fed, or a building hat needs urgent repairs?			
			Where is the property?	3

City

ZIP Code

State

Debtor 1

DOMINIQUE HARRIS

Case number (if known)_



Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
You must check one:	You must check one:
I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.	☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.	Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. Within 14 days after you file this bankruptcy petition,	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have certificate of completion.
you MUST file a copy of the certificate and payment plan, if any.	Within 14 days after you file this bankruptcy petition you MUST file a copy of the certificate and paymen plan, if any.
I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.	If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.	Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
i am not required to receive a briefing about credit counseling because of:	I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-39856 Doc 1 Filed 12/20/16 Entered 12/20/16 10:15:33 Desc Main Document Page 6 of 62

Debtor 1

LETISHA DOMINIQUE HARRIS
First Name Middle Name Last Name

Case number (if known)

Part 6: Answer These	Questions for Reporting Purp	oses	
16. What kind of debts of you have?	io 16a. Are your debts prin as "incurred by an indivi	narily consumer debts? Consumer de dual primarily for a personal, family, or ho	ebts are defined in 11 U.S.C. § 101(8)
•	No. Go to line 16b. Yes. Go to line 17.		
	16b. Are your debts prim money for a business or	arily business debts? Business debt investment or through the operation of the	s are debts that you incurred to obtain e business or investment.
	No. Go to line 16c. Yes. Go to line 17.		
35-definition of transfer or transfer	16c. State the type of debts y	ou owe that are not consumer debts or bu	usiness debts.
17. Are you filing under Chapter 7?	☐ No. I am not filing under	Chapter 7. Go to line 18.	
Do you estimate that any exempt property excluded and administrative expen- are paid that funds w	is administrative expenses	pter 7. Do you estimate that after any exe ses are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?
available for distribut to unsecured creditor	ion		
18. How many creditors of you estimate that you owe?	1-49 50-99 100-199 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
is. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
How much do you estimate your liabilitie to be? Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion □ More than \$50 billion
For you	I have examined this petition, a correct.	nd I declare under penalty of perjury that	the information provided is true and
	If I have chosen to file under Chof title 11, United States Code, under Chapter 7.	napter 7, I am aware that I may proceed, i I understand the relief available under ea	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed
	and december, there obtained	d I did not pay or agree to pay someone vand read the notice required by 11 U.S.C	. § 342(b).
	I request relief in accordance w	ith the chapter of title 11, United States Co	ode, specified in this petition.
	with a bankruptcy case can resu 18 U.S.C. §§ 152, 1341, 1519, a		money or property by fraud in connection on for up to 20 years, or both.
	& deligh f.	x	
	Signature of Debtor 1	Signature	of Debtor 2
是是一个人们的一个人们的一个人们的一个人们的一个人们的一个人们的一个人们的一个人们的	Executed on 12/14/2016 MM / DD /	Executed	on

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Debtor 1 HARRIS Case number (if known)_ I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility For your attorney, if you are to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief represented by one available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no If you are not represented knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. by an attorney, you do not need to file this page. **x** <u>N/A</u> Date Signature of Attorney for Debtor DD /YYYY Printed name Firm name Number Street City State ZIP Code Contact phone Email address Bar number State

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Debtor 1

ETISHA DOMINIQUE

HARRIS

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also

ţ	be familiar with any state exemption laws that apply	
	Are you aware that filing for bankruptcy is a serious consequences?	action with long-term financial and legal
	☐ No	
	☑ Yes	
:	Are you aware that bankruptcy fraud is a serious cri inaccurate or incomplete, you could be fined or impl	
	□ No	
	Yes	
	Did you pay or agree to pay someone who is not an \square No	attorney to help you fill out your bankruptcy forms?
	Yes, Name of Person VERNICE WARREN	***************************************
	Attach Bankruptcy Petition Preparer's Notice,	Declaration, and Signature (Official Form 119).
	By signing here, I acknowledge that I understand the have read and understood this notice, and I am awa attorney may cause me to lose my rights or property	re that filing a bankruptcy case without an
Œ	John Del	*
	Signature of Debtor 1	Signature of Debtor 2
	Date 12/14/2016	Date

MM / DD / YYYY

(773) 484-6444

Email address LETISHAHARRIS_3@HOTMAIL

Contact phone (773) 484-6444

Cell phone

MM / DD / YYYY

Contact phone

Cell phone

Email address

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LETISHA DOMINIQUE HARRIS CREDIT MATRIX

AFNLINC POB 3427

BLOOMINGTON IL 61702

CAPITAL ONE POB 30285

SALT LAKE CITY UT 84130

SHELL/CBNA POB 6497

SIOUX FALLS SD 57117

CHASE POB 15298

WILMINGTON DE 19850

VICTORIA SECRETS/COMENITY

POB 182273

COLUMBUS OH 43218

CONVERGENT HEALTHCARE 121 NE JEFFERSON ST STE 100

PEORIA IL 61602

CREDIT ONE BANK

POB 98873

LAS VEGAS NV 89193

FIRST PREMIER BANK 301 S MINNESOTA AVE SIOUX FALLS SD 57104

FSB BLAZE CREDIT CARD

POB 5096

SIOUX FALLS SD 57117

MACY'S POB 8218

MASON OH 05040

WALMART/SYNCHRONY

POB 965024

ORLANDO FL 32896

TD BANK USA/ TARGET CARD

POB 673

MINNEAPOLIS MN 55440

US BANK

POB 108

SAINT LOUIS MO 63166

VERIZON WIRELESS

POB 26055

MINNEAPOLIS MN 55426

GETTINGTON/WEBBANK

6250 RIDGEWOOD RD

SAINT CLOUD MN 53030

BIOREFERENCE LABORATORIES

481 EDWARD H ROSS DRIVE

ELMWOOD PARK NJ 07407

TRANSWORLD SYSTEMS COLLECTIONS

507 PRUDENTIAL ROAD

HOSHAM PA 19044

GREAT LAKES HIGHER EDUCATION

PO BOX 7860

MADISON WI 53707

CONVERGENT

800 SW 39TH ST POB 9004

RENTON WA 98057

AMEREN ILLINOIS

POB 88034

CHICAGO IL 60680

KINDRED LLC

2806 N KNOXVILLE AVE

PEORIA IL 61604

STELLAR RECOVERY INC

POB 48370

JACKSONVILLE FL 32247

Case 16-39856 Doc 1 Filed 12/20/16 Entered 12/20/16 10:15:33 Desc Main Document Page 10 of 62 LETISHA DOMINIQUE HARRIS CREDIT MATRIX

CHECK & GO COLLECTIONS
7755 MONTGOMERY ROAD STE 400
CINCINNATI OH 45236

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Fill in this i	nformation to ic	lentify your case:		
Debtor 1	LETISHA	DOMINIQUE	HARRIS	
· ·	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filling) First Name	Middle Name	Last Name	~~~
United States	Bankruptcy Court I	for the: Northern District of	Illinois	N.
Case number	(If known)		······································	

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part/13 Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	0.00
1a. Copy line 55, Total real estate, from Schedule A/B	. \$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	. \$2,853.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 2,853.00
Fan 2: Summarize Your Liabilities	<u> </u>
2. Schedule D: Craditora Who House Chinas See and h. D. and J. Craditora Who House Chinas See and h. D. and J. Craditora	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$102,718.33
Your total liabilities	\$102,718.33
PautSH Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$575.00
5. Schedule J: Your Expenses (Official Form 106J)	All and a second a
Copy your monthly expenses from line 22c of Schedule J	\$551.00

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LETISHA Debtor 1 DOMINIQUE **HARRIS** Case number (if known) Middle Neme Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 275.00 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 0.00 9d. Student loans. (Copy line 6f.) 78,611.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total, Add lines 9a through 9f.

0.00

78,611.00

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Debtor 1	LETISHA	DOMINIQUE	HARRIS	
	First Name	Middle Name	Last Name	
Debtor 2			_	
(Spouse, if filing)	First Name	Middle Name	Last Name	
	Bankruptcy Cour	t for the: Northern District o	f Illinois	
ase number				

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

Street address, if available, or other descript	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured of the amount of any secure Creditors Who Have Clai	ed claims on Schedule D
	Condominium or cooperativeManufactured or mobile home	Current value of the entire property?	Current value of th portion you own?
	Land Investment property	\$	\$
City State ZIP	Code Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		,,
County	Debtor 1 only Debtor 2 only		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
	At least one of the debtors and another Other information you wish to add about this it	(see instructions)	mmunity property
own or have more than one, list here:	At least one of the debtors and another	(see instructions)	mmunity property
	At least one of the debtors and another Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home	(see instructions)	ims or exemptions. Put I claims on <i>Schedule D</i>
	At least one of the debtors and another Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home	(see instructions) tem, such as local Do not deduct secured cla	ilms or exemptions. Put I claims on <i>Schedule D.</i> is <i>Secured by Property</i> . Current value of the
	At least one of the debtors and another Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	(see instructions) tem, such as local Do not deduct secured cla the amount of any securer Creditors Who Have Clain Current value of the	ilms or exemptions. Put I olaims on <i>Schedule D</i> : as Secured by Property.
Street address, if available, or other description	At least one of the debtors and another Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	(see instructions) tem, such as local Do not deduct secured cla the amount of any securer Creditors Who Have Clain Current value of the entire property? \$ Describe the nature o interest (such as fee s	ims or exemptions. Put d claims on Schedule D. is Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by
Street address, if available, or other description	At least one of the debtors and another Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	(see instructions) tem, such as local Do not deduct secured cla the amount of any securer Creditors Who Have Clain Current value of the entire property? \$	ims or exemptions. Put d claims on Schedule D. is Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by
Street address, if available, or other description	At least one of the debtors and another Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only	(see instructions) tem, such as local Do not deduct secured cla the amount of any securer Creditors Who Have Clain Current value of the entire property? \$ Describe the nature o interest (such as fee s	ims or exemptions. Put d claims on Schedule D. is Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by
	At least one of the debtors and another Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	(see instructions) tem, such as local Do not deduct secured cla the amount of any securer Creditors Who Have Clain Current value of the entire property? \$ Describe the nature o interest (such as fee s	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$

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Document Page 14 of 62 LETISHA DOMINIQUE **HARRIS** First Name Case number (if known) Middle Name Last Name

1	.3. Street address, if avail	able, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. The Current value of the portion you own?
	City	State ZIP Code	Other	interest (such as for the entireties, or a	ss e of your ownership ee simple, tenancy by life estate), if known.
	County		Who has an interest in the property? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this property identification number:	Check if this is (see instructions	community property)
2 Add you	the dollar value of the have attached for Pan	portion you own for a t 1. Write that number	II of your entries from Part 1, including any entri	ies for pages ······→	\$ 0.00
Do you you own	own, lease, or have let that someone else driv	gal or equitable interes	et in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts	r not? Include any vehicles and Unexpired Leases.	es
	, vans, trucks, tractors	gal or equitable interes es. If you lease a vehicle s, sport utility vehicles,	s, also report it on Schedule G: Executory Contracts	r not? Include any vehicle s and Unexpired Leases.	PS
3. Cars	, vans, trucks, tractors	7	motorcycles	s and Unexpired Leases.	
3. Cars	, vans, trucks, tractors to es	, sport utility vehícles,	who has an interest in the property? Check one.	Do not deduct secured of the amount of any secure	aims or exemptions, Put
3. Cars	, vans, trucks, tractors to es Make:	s, sport utility vehicles,	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	s and Unexpired Leases.	aims or exemptions, Put
3. Cars	, vans, frucks, fractors to es Make: Model:	TOYOTA YARIS 2007	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the
3. Cars	, vans, trucks, tractors to es Make: Model: Year:	TOYOTA YARIS 2007	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claim amount of any secure Creditors Who Have Claim	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
3. Cars	, vans, frucks, fractors lo es Make: Model: Year: Approximate mileage:	TOYOTA YARIS 2007 222,121	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the
3. Cars	Make: Model: Year: Approximate mileage:	TOYOTA YARIS 2007 222,121	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	eims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
3. Cars \textsylvar \textsylvar \textsylvar 3.1.	Make: Model: Year: Approximate mileage: Other information: EXEMPTED SCH	TOYOTA YARIS 2007 222,121 C one, describe here:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$	aims or exemptions. Put d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$
3. Cars \(\int \) \(\text{N} \) \(\text{Y} \) 3.1. If you 3.2.	Make: Model: Year: Approximate mileage: Other information: EXEMPTED SCH	TOYOTA YARIS 2007 222,121 C one, describe here:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured class. Do not deduct secured class. Current value of the entire property? \$ 2,110.00 Do not deduct secured class the amount of any secure control of any secured class the amount of any secured cla	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 2,110.00
3. Cars \[\begin{align*} \text{N} & \text{N} & \text{Y} & \text{3.1.} \\ \text{If you} & \text{3.2.} \\ 3.2.	Make: Model: Year: Approximate mileage: Other information: EXEMPTED SCH	TOYOTA YARIS 2007 222,121 C one, describe here:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class and Unexpired Leases. Do not deduct secured class amount of any secure Creditors Who Have Claim Current value of the entire property? \$ 2,110.00 Do not deduct secured class the amount of any secured Creditors Who Have Claim	aims or exemptions. Put d claims on Schedule Dins Secured by Property. Current value of the portion you own? \$ 2,110.00 ims or exemptions, Put claims on Schedule D: is Secured by Property.
3. Cars \[\begin{align*} \text{N} & \text{N} & \text{Y} & \text{3.1.} \\ \text{If you} & \text{3.2.} \\ 3.2.	Make: Model: Year: Approximate mileage: Other information: EXEMPTED SCH own or have more than Make: Model: Year:	TOYOTA YARIS 2007 222,121 C one, describe here:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured class and Unexpired Leases. Do not deduct secured class amount of any secure Creditors Who Have Claim Current value of the entire property? \$ 2,110.00 Do not deduct secured class the amount of any secured Creditors Who Have Claim Current value of the	aims or exemptions. Put d claims on Schedule Dins Secured by Property. Current value of the portion you own? \$ 2,110.00 ims or exemptions, Put claims on Schedule D: is Secured by Property. Current value of the
3. Cars 1. N 3.1.	Make: Model: Year: Approximate mileage: Other information: EXEMPTED SCH own or have more than Make: Model: Year:	TOYOTA YARIS 2007 222,121 C one, describe here:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class and Unexpired Leases. Do not deduct secured class amount of any secure Creditors Who Have Claim Current value of the entire property? \$ 2,110.00 Do not deduct secured class the amount of any secured Creditors Who Have Claim	aims or exemptions. Put d claims on Schedule Dins Secured by Property. Current value of the portion you own? \$ 2,110.00 ims or exemptions, Put claims on Schedule D: is Secured by Property.
3. Cars 1. N 3.1.	Make: Model: Year: Approximate mileage: Other information: EXEMPTED SCH own or have more than Make: Model: Year: Approximate mileage:	TOYOTA YARIS 2007 222,121 C one, describe here:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured class and Unexpired Leases. Do not deduct secured class amount of any secure Creditors Who Have Claim Current value of the entire property? \$ 2,110.00 Do not deduct secured class the amount of any secured Creditors Who Have Claim Current value of the	aims or exemptions. Put d claims on Schedule D. ins Secured by Property. Current value of the portion you own? \$

Debtor 1

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LETISHA Debtor 1 DOMINIQUE **HARRIS** Case number (if known) First Name Middle Name Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) 3.4. Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories Z No Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Debtor 1 only Model: Creditors Who Have Claims Secured by Property, Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Other information: Current value of the At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: entire property? portion you own? At least one of the debtors and another Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 2,110.00 you have attached for Part 2. Write that number here

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Debtor 1

LETISHA

DOMINIQUE

HARRIS

Case number (if known) First Name Middle Name

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A1366.				О.
1352	188	100	258	827.
2323	200	735E	Y.98	
2000	2332	15.50	1.00	534

Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?	Current value of portion you own? Do not deduct secure	?
6. Household goods and furnishings	or exemptions.	
Examples: Major appliances, furniture, linens, china, kitchenware		
No No		
Yes. Describe	1 C 1 C	
And the state of t	\$	0.00
/ Electronics		
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printer collections; electronic devices including cell phones, appears and the collections;	rs, scanners; music	
to the state of medianing cerripricities, cameras, media players, games		
Q Yes. Describe	The same of the sa	
	\$	0.00
Collectibles of value		
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art		
	objects;	
No Yes. Describe		
	\$	0.00
9. Equipment for sports and hobbies		
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf and kayaks; carpentry tools; musical instruments	clubs, skis; canoes	
₩ No		
2 Yes. Describe	The state of the s	
The state of the s	\$	0.00
1U. FIREARMS	The state of the s	
Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
Yes. Describe		
at 100. Describe	\$	0.00
11. Clothes		
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
tead NO		
Yes, Describe, EVERYDAY CLOTHES	a 20	00.00
	\$\$	10.00
2. Jewelry		
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, gold, silver		
	watches, gems,	
Ø No		
Yes. Describe	\$	0.00
3. Non-farm animals	A TOTAL STATE OF THE STATE OF T	
Examples: Dogs, cats, birds, horses		
EA ala		
Yes. Describe		
		0.00
Any other personal and household items you did not already list, including any health aids yo	o., did ==41:-4	
No	ou aid not list	
Yes. Give specific		200
information	\$	0.00
Add the dollar value of all of volve orbitos from D. 40.1.1.		
Add the dollar value of all of your entries from Part 3, including any entries for pages you have for Part 3. Write that number here	ve attached \$ 200	0.00
The second commence of	•	

Middle Name

Document

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Debtor 1

LETISHA First Name

DOMINIQUE

Last Name

HARRIS

Case number (if known)



Describe Your Financial Assets

Do you own or have any	legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your petition	
☐ No ☑ Yes		Cash:	\$50.00
17. Deposits of money Examples: Checking, s and other si No	avings, or other financial accou milar institutions. If you have m	unts; certificates of deposit; shares in credit unions, brokerage houses, autiple accounts with the same institution, list each. Institution name:	
	17.1. Checking account:	FEDERAL NAVY CREDIT UNION	402.00
	-	PEDELOCE WAY I ONEDIT UNION	\$\$
	17.2. Checking account:		\$
	17.3. Savings account:		\$
	17.4. Savings account:		\$
	17.5. Certificates of deposit:		\$
	17.6. Other financial account:		\$
	17.7. Other financial account:		\$
	17.8. Other financial account:		\$
	17.9. Other financial account:		\$
18. Bonds, mutual funds, o Examples: Bond funds, i Ø No Q Yes	or publicly traded stocks nvestment accounts with broke institution or issuer name:	erage firms, money market accounts	\$ \$ \$
 19. Non-publicly traded sto an LLC, partnership, at I No Yes. Give specific 	ock and interests in incorporand joint venture Name of entity:	ated and unincorporated businesses, including an interest in % of ownership:	
information about them			\$
		0% %	\$
to the state of th		,,,	Ψ

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Last Name

Middle Name

Document Page 18 of 62 LETISHA DOMINIQUE Debtor 1 **HARRIS** Case number (# known) First Name

Negotiable instruments i		Julet negotiable and non-negotiable instruments	
	include personal of	other negotiable and non-negotiable instruments hecks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.	
Ø No			
Yes. Give specific	Issuer name:		
information about them	20		
			\$
			\$
			\$
21. Retirement or pension	accounts		
Examples: Interests in IR	RA, ERISA, Keogh,	401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
No Yes. List each			
account separately.	Type of account:	Institution name:	
	401(k) or similar pla		
		n:	\$
	Pension plan:		\$
	IRA:		\$
	Retirement account:		\$
	Keogh:		\$
	Additional account:		
	Additional account:		\$
	ith landlasds assets	made so that you may continue service or use from a company	
companies, or others	randiords, prepa	aid rent, public utilities (electric, gas, water), telecommunications	
companies, or others		aid rent, public utilities (electric, gas, water), telecommunications	
companies, or others No Yes	İr	aid rent, public utilities (electric, gas, water), telecommunications	
companies, or others No Yes	ir Electric:	aid rent, public utilities (electric, gas, water), telecommunications	\$
companies, or others No Yes	ir Electric: Gas:	aid rent, public utilities (electric, gas, water), telecommunications	Φ.
companies, or others No Yes	ir Electric: Gas: Heating oil:	aid rent, public utilities (electric, gas, water), telecommunications	\$
companies, or others No Yes	ir Electric: Gas: Heating oil: Security deposit on re	aid rent, public utilities (electric, gas, water), telecommunications	\$ \$
companies, or others No Yes F	ir Electric: Gas: Heating oil: Security deposit on re	aid rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$
companies, or others No Yes	ir Electric: Gas: -leating oil: Security deposit on re Prepaid rent:	ntal unit:	\$ \$ \$ \$ \$
companies, or others No Yes E C H S W	ir Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Felephone:	ntal unit:	\$\$ \$\$ \$\$
companies, or others No Yes R R	ir Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Felephone: Water:	ntal unit:	\$\$ \$\$ \$\$
companies, or others No Yes R	ir Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Felephone:	ntal unit:	\$\$ \$\$ \$\$ \$\$
companies, or others No Yes	Ir Electric: Gas: -leating oil: Prepaid rent: Felephone: Water: Rented furniture:	and rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Intal unit:	\$\$ \$\$ \$\$ \$\$
companies, or others No Yes R R Annuities (A contract for a	Ir Electric: Gas: -leating oil: Prepaid rent: Felephone: Water: Rented furniture:	ntal unit:	\$\$ \$\$ \$\$
companies, or others No Yes	Ir Electric: Gas: -leating oil: Security deposit on re Prepaid rent: Felephone: Water: Rented furniture: Other:	and rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Intal unit: Dof money to you, either for life or for a number of years)	\$ \$ \$ \$ \$
companies, or others No No Yes	Ir Electric: Gas: -leating oil: Prepaid rent: Felephone: Water: Rented furniture:	and rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Intal unit: Dof money to you, either for life or for a number of years)	\$\$ \$\$ \$\$
companies, or others No Yes	Ir Electric: Gas: -leating oil: Prepaid rent: Felephone: Water: Rented furniture: periodic payment of the same and deserved.	and rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Intal unit: Dof money to you, either for life or for a number of years)	\$\$ \$\$ \$\$

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Desc Main

Case 16-39856 Entered 12/20/16 10:15:33 Page 19 of 62 Document LETISHA DOMINIQUE **HARRIS** Debtor 1 Case number (if known) First Nama 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). **O** No 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☑ No Yes. Give specific information about them... \$ 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☑ No Yes. Give specific information about them... \$ 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you E No Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes, Give specific information...... Alimony: Maintenance: Support: Divorce settlement:

☑ No

30. Other amounts someone owes you

Yes. Give specific information.....

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation,

Social Security benefits; unpaid loans you made to someone else

Property settlement:

Document

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Debtor 1

LETISHA First Name

DOMINIQUE

HARRIS

Case number (if known)

First Name Middle Name	Last Name	Case number (if known)	
And the second s	MANAGER LANGUAGE		
31. Interests in insurance policies	en e	estados en entre en entre en estad	eritarian en mariamente foi (de menumente estrato en transcente en transcente en transcente en transcente en m En transcente en transcent
Examples: Health, disability, or life insurar	nce; health savings account (HSA); (credit, homeowner's, or renter's insurance	
KW NO		, , , , , , , , , , , , , , , , , , , ,	
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value.
			\$
			\$
			\$
32. Any interest in property that is due you if you are the beneficiary of a living trust, e property because someone has died. No	from someone who has died expect proceeds from a life insurance	policy, or are currently entitled to receive	
Yes. Give specific information			NAMARAN ANY E
,			\$
33. Claims against third narting whather a			
33. Claims against third parties, whether or Examples: Accidents, employment dispute No	s, insurance claims, or rights to sue	ade a demand for payment	
Yes. Describe each claim			
, co. Describe each claim			\$
34. Other contingent and unliquidated claim to set off claims	s of every nature, including count	erclaims of the debtor and rights	
☑ No			
Yes. Describe each claim.			
			\$
35. Any financial assets you did not already	list		
☑ No			***************************************
Yes. Give specific information			
and the second s			\$
6. Add the dollar value of all of your entries	from Part 4. including any entries	s for names you have attached	
for Part 4. Write that number here			s 543.00
and the state of t		_	
905095623337831460mm	and the second of the second o	te di Sistema amba sipat qui mit processoria processoria si monte de mito de mito de mito an ambas en più immenente del più monte amba que monte e de de mito	Policialization and any metapolitic colorida in commence operations and commence are completely above interestina
Describe Any Business-R	elated Property You Own	or Have an Interest In. List any i	
			earestate in Part 1.
 Do you own or have any legal or equitable No. Go to Part 6. 	e interest in any business-related	property?	
Yes. Go to line 38.			
Les. Go to the so.			Allianthypinthysia ya
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions,
3. Accounts receivable or commissions you	already earned		
Q No			
Yes. Describe			
Delice continuent formula to			\$
Office equipment, furnishings, and suppli Examples: Business-related computers, software, r	nodems printers copiers for machine	man talanharan di di di	
□ No		ougo, rereptiones, desks, chairs, electronic devices	
☐ Yes. Describe	Annual design to the second of		
	«Меф ф. «Филиментен» (меф.) («Меф.) (\$
The first the second community and a second control of the second	mark to a		

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Case number (if known)

HARRIS

LETISHA

First Name

Debtor 1

DOMINIQUE

Middle Name

First Name	Middle Name Last Name Case Humbel (##	known)	
40. Machinery, fixtures, eq	uipment, supplies you use in business, and tools of your trade		
M No			
Yes. Describe		***************************************	
No company (A			\$
			
41 Inventory			
✓ No ☐ Yes. Describe			MARKET AND ADDRESS OF THE PARKET AND ADDRESS
w res. Describe			\$
			
42. Interests in partnership	s or joint ventures		
Ø No			
Q Yes. Describe	Name of entity;	% of ownership:	
-		%	\$
		%	\$
-		%	\$
43. Customer lists, mailing	lists, or other compilations		
	and the land of th		
Q No	nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A)))?	
Yes. Describ			
Tes, Descrit	96		\$
44. Any business-related pr	roperty you did not already list		
₩ No			
Yes. Give specific information			\$
			¢
-			Ψ
_			\$
-			\$
-			\$
_			\$
45. Add the dollar value of	all of your entries from Part 5, including any entries for pages you have atta		
for Part 5. Write that nu	mber here	cnea	\$
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	· · · · · · · · · · · · · · · · · · ·	au-refeld , -ethethiddigereider k/Algar (Australia) (Art. ethethiddigereider k/Algar (Australia) (Aus	entrally derived dig (http://www.compactions.edu.entrally.com/derived derived and an address and advantage of a control of the control of th
Pati 6: Describe Any	Farm- and Commercial Fishing-Related Property You Own or Have	e an Interest In	
If you own or h	ave an interest in farmland, list it in Part 1.	e an interest in	•
	The state of the s		
16. Do you own or have any	legal or equitable interest in any farm- or commercial fishing-related prope	rty?	
No. Go to Part 7. Yes. Go to line 47.			
tes. Go to line 47,			
			Current value of the
			portion you own?
i 7 Marsayan ayustuu 22			Do not deduct secured claims or exemptions.
 Farm animals Examples: Livestock, pou- 	Itru farm raiond fish		
No	my, raminalsed iisii		
C Yes			4
The symmetry			\$
	The state of the s		

Middle Name

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Debtor 1

LETISHA DOMINIQUE

First Name

Document **HARRIS**

Last Name

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48. Crops—either growing or harvested No No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No No U Yes..... 50. Farm and fishing supplies, chemicals, and feed Q Yes..... 51. Any farm- and commercial fishing-related property you did not already list M No Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership 1 No Yes. Give specific information..... 54 Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 2,110.00 57. Part 3: Total personal and household items, line 15 200.00 58. Part 4: Total financial assets, line 36 543.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 0.00 62. Total personal property. Add lines 56 through 61. 2,853.00 Copy personal property total 👈 2,853,00 63. Total of all property on Schedule A/B. Add line 55 + line 62. 2.853.00

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ebtor 1	LETISHA	DOMINIQUE	HARRIS
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if filling)	First Name	Middle Name	Last Name
Jnited States I	Bankruptcy Court fo	r the:Northern District of Illinois	
Case number			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:

Identify the Property You Claim as Exempt

Brief descript Schedule A/B	ion of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	CAR	\$ <u>2,110.00</u>	_ \$	735ICS 5/12-1001
Line from Schedule A/B:	2.3		100% of fair market value, up to any applicable statutory limit	
Brief description:	CASH ON HAND	\$ <u>50.00</u>	Q \$	625 ILCS45/3A-7;735ILCS
Line from Schedule A/B:	4.16_		100% of fair market value, up to any applicable statutory limit	15/12-1001
Brief description:		\$	□s	
Line from Schedule A/B:	Property and Administration		100% of fair market value, up to any applicable statutory limit	

Document

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Debtor 1

LETISHA

DOMINIQUE

HARRIS

Case number (# known)

Additional Page

Brief descripti on Schedule /	on of the property and line VB that lists this property	Current portion	t value of the you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy th Schedu	e value from le A/B	Check only one box for each exemption	
Brief description:	CLOTHING	\$	200.00		625ILCS45/3S-7;735 ILCS15/12-1001
Line from Schedule A/B:	3.11_		1 8.1	100% of fair market value, up to any applicable statutory limit	
Brief description:	NAVY FEDERAL	\$	493,00		735 ILCS 5/12 -1001 (b)
Line from Schedule A/B:	4.17			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		□ s	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		□ \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		u \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		□ \$	
Line from Schedule A/B;	Androp de propagation de la constante de la co		···	100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		 \$	
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$	*****	<u>_</u> \$	
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	·····		
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$		Q \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$		Q \$	
Line from Schedule A/B: —				100% of fair market value, up to any applicable statutory limit	
Brief description: -		\$	~		
Line from Schedule A/B:	MANAGAR PROPERTY AND ASSESSMENT OF THE PROPERTY AND ASSESSMENT OF THE PROPERTY AND ASSESSMENT OF THE PROPERTY OF THE PROPERTY ASSESSMENT OF THE PROPERTY ASSESSMENT OF THE PROPERTY OF THE PROPERTY ASSESSMENT OF THE PROPERTY		•	100% of fair market value, up to any applicable statutory limit	

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Fill in this i	nformation to id	lentify your case:		
Debtor 1	LETISHA	DOMINIQUE	HARRIS	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing) First Name	Middle Name	Last Name	
United States	Bankruptcy Court	for the: Northern District of II	linois	
Case number (If known)				

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Column C

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

Column A

Column B

- 1. Do any creditors have claims secured by your property?
 - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately Amount of claim Value of collateral Unsecured for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. Do not deduct the that supports this portion As much as possible, list the claims in alphabetical order according to the creditor's name. value of colleteral claim If any 2.1 Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code Disputed Who owes the debt? Check one. Nature of iten. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 2.2 Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan)

Debtor 1 and Debtor 2 only

Check if this claim relates to a community debt Date debt was incurred

At least one of the debtors and another

☐ Statutory lien (such as tax lien, mechanic's lien)

Judgment lien from a lawsuit Other (including a right to offset)

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

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LETISHA First Name **DOMINIQUE HARRIS** Debtor 1 Case number (if known)

Middle Name

Part 1: Additional Page After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's Name Number Street	Describe the property that secures the claim:	\$	\$	\$
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
	SOME AND ADDRESS OF THE STATE O	*	S	**************************************
Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number		TRANSPORTE CONTROL BEAUTYPOTHER FOR THE STANSPORTE SEPTEMBER (SEPTEMBER SEPTEMBER SEPT	owenderfalielle with most billion blackfordering scope
Creditor's Name Number Street	Describe the property that secures the claim:	\$	\$	\$
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Nature of iten. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Date debt was incurredAdd the dollar value of your entries	Last 4 digits of account number in Column A on this page. Write that number here: add the dollar value totals from all pages.	5		Period and the second s

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Dæ	blos	1	

LETISHA

DOMINIQUE

Part 2: List Others to Be Notified for a Debt That You Already Listed

HARRIS

LIGHA	DOMINIC		AKKIS	Case number as
irst Name	Middle Name	Last Name		Case number (if known)

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? __ Name Last 4 digits of account number ____ ___ Number Street State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number ____ ___ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number ____ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number ____ ___ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number __ Number City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number _____ Number Street City ZIP Code

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Debtor 1	LETISHA	DOMINIQUE	HARRIS					
	First Name	Middle Name	Last Name					
Debtor 2 Spouse, if fiting	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the: Northern District of Illinois								

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	1.18 List All of Your PRIORITY Unsecur	ed Claims			
1,	Do any creditors have priority unsecured claim	s against you?			
	No. Go to Part 2.	•			
	☐ Yes.				
	each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the	reditor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's new Part 1. If more than one creditor holds a particular claim instructions for this form in the instruction booklet.)	at claim here a ame. If you hav	nd show both e more than t	priority and wo priority
			Total claim	Priority amount	Nonpriority amount
2.1		Last 4 digits of account number	\$	\$	\$
;	Priority Creditor's Name	2031 4 digits of account number			
	Number Street	When was the debt incurred?			
	Manner				
		As of the date you file, the claim is: Check all that apply	<i>t</i> .		
	City State ZIP Code	Contingent			
	Who incurred the debt? Check one.	Unliquidated			
	Debtor 1 only	☐ Disputed			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
1	Debtor 1 and Debtor 2 only				
1	At least one of the debtors and another	Domestic support obligations			
	Check if this claim is for a community debt	Taxes and certain other debts you owe the government			
		 Claims for death or personal injury while you were intoxicated 			
į.	Is the claim subject to offset?	Other. Specify			
	□ Yes	Caron, opening	•		
2.2			dade skieltudes duraleur servalussur aur verbiere dar echenal och sch	idorestoralisma ramaidestativitatorhamicost eteritain	e de l'emple par Cope de l'emple de l'emple de l'emple par l'emple par l'emple par l'emple par l'emple par l'e L'emple par l'emple par l'emple de l'emple de l'emple par l'emple par l'emple par l'emple par l'emple par l'em
	Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	_ \$
		When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			
	•	Disputed			
	Who incurred the debt? Check one. Debtor 1 only	■ Disputed			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			National Permanantal And Art
	Is the claim subject to offset?	Other. Specify			and the state of t
	☐ No				
	Yes				

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Document HARRIS Page 29 of 62 **LETISHA** Debtor 1 Case number (if known) Your PRIORITY Unsecured Claims — Continuation Page Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. **Total claim Priority** Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent City Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other, Specify Is the claim subject to offset? □ No Yes Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent State ZIP Code Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other, Specify Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent City State ZIP Code Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only

☐ No Yes

At least one of the debtors and another

is the claim subject to offset?

Check if this claim is for a community debt

intoxicated Other, Specify

☐ Taxes and certain other debts you owe the government

Claims for death or personal injury while you were

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LETISHA

Document

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Debtor 1

DOMINIQUE Middle Name First Name

HARRIS

Case number (if known)_

3.	Do any creditors have nonpriority a	insecured	claims anaine	et vou?	/	
	No. You have nothing to some	in the second of	cianns agains	st your		
	Yes Yes	this part. St	JDMit this form	to the court with your other schedules.		
		Silvinian to the second	in the first transfer over the section in the section of the secti			
4.	List all of your popularity unspayed					
	DODDFORM unsecured claim list the as	o ciaims ii	n the alphabe	tical order of the creditor who holds each claim. If a creditor he	is more th	an one
	included in Part 1. If more than one on	eunor sepa	rately for each	claim. For each claim listed, identify what type of claim it is. Do no	t list clain	is already
	claims fill out the Continuation Page o	eunor noigs	a particular ci	claim. For each claim listed, identify what type of claim it is. Do no alm, list the other creditors in Part 3.If you have more than three n	onpriority	unsecured
	The made of the Continuation Page of	ranz.				
			2. 1.11. 2. 111.00.00.00.00.00.00.00.00.00.00.00.00.			
	6 5 6 1 6 1 6				Total c	:laim
. !	AFNIINC			Last 4 digits of account number 7 7 2 7		
	Nonpriority Creditor's Name			Last 4 digits of account number 1 1 2 1	¢.	244.00
	POB 3427			When was the debt incurred? 10/02/2016	Ψ	
	Number Street			The state of the s		
	BLOOMINGTON	16	0.47700			
	City	IL	61702			
	Oity	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
				☐ Contingent		
	Who incurred the debt? Check one.					
	Debtor 1 only			Unliquidated		
	Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and anothe	r		·		
	Digital says and a			Student loans		
	Check if this claim is for a commu	inity debt		Obligations arising out of a separation agreement or divorce		T Comment
	Is the claim subject to offset?			that you did not report as priority claims		
	[T]() ;			Debts to pension or profit-sharing plans, and other similar debts	į.	
	☐ Yes			Other, Specify MEDICAL BILL ST FRANCIS		
	Li Yes					140
	The control of the co	erderssmannt (namedyskritersmen sann (namedyskriter)	-			
	AFNIINC			Last 4 digits of account number 3 5 7 4	\$	446.00
	Nonpriority Creditor's Name			When was the debt incurred? 05/12/2016	Ψ	
	POB 3427			Titles was the debt sicused?		ad the state of th
	Number Street			***************************************		A service
	BLOOMINGTON	11	0.477.0	An otto I a may be a		vienes _{se} e
	City	iL	61702	As of the date you file, the claim is: Check all that apply.		and the same of th
	City	State	ZIP Code	Contingent		and the second
	Who incurred the debt? Check one.			Unliquidated		
						Î
	Debtor 1 only			☐ Disputed		
	Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		1
	At least one of the debtors and another			Student loans		
	Check if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce		National .
	Is the claim subject to offset?			that you did not report as priority claims		
	The claum subject to onser?			Debts to pension or profit-sharing plans, and other similar debts		, i
	Q No			Other, Specify MEDICAL BILL ST FRANCIS		į
	☐ Yes					
100		an termina a Merida, recommenda (Merida) esta	edern mett freihe trenst hellet in de service en e		NAMES OF TAXABLE SPECIAL SPECI	Martinista an majora apparating apparating and
	CAPITAL ONE			Last 4 digits of account number7568		
	Nonpriority Creditor's Name				\$	690.00
	POB 30285			When was the debt incurred? 12/14/2016		
	Number Street					
	SALT LAKE CITY	M	84130			į
	City	State 1		As of the date you file, the claim is: Check all that apply.		
		State .	ZIP Code			***************************************
	Who incurred the debt? Check one.			☐ Contingent		İ
	Debter 1 only			Unliquidated		
	Debtor 2 only			Disputed		
	Debtor 1 and Debtor 2 only			Tuno of MONDBIODITY		***
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
				☐ Student loans		į
	Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce		İ
	Is the claim subject to offset?			that you did not report as priority claims		
	O No			Debts to pension or profit-sharing plans, and other similar debts		
	Lives			Other, Specify <u>CREDIT CARD</u>		1
	¥#\$ YES			- Carer, Opecary OTTED IT CAND		
		·· M· ··				The state of the s

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Debtor 1

LETISHA First Name

DOMINIQUE Middle Name

Document **HARRIS**

Case number (if known)_



Your NONPRIORITY Unsecured Claims — Continuation Page

4 SHELL/CBNA			Last 4 digits of account number	•	000		
Nonpriority Creditor's Name				10/12/2016	_{\$} 869		
POB 6497			When was the debt incurred?	10/12/2016			
SIOUX FALLS	SD	571 17	As of the date you file, the claim	is: Check all that apply.			
City Who incurred the debt? Check o	State ine.	ZiP Code	Contingent Unliquidated Disputed				
Debtor 2 only			Type of NONPRIORITY unsecu	red claim:			
Debtor 1 and Debtor 2 only At least one of the debtors and a	another		Student loans				
	Check if this claim is for a community debt			ration agreement or divorce that ms g plans, and other similar debts			
Is the claim subject to offset? \[\sum_{\text{No}} \text{No} \] Yes			Other, Specify CREDIT CA	ĂŘD			
CHASE CARD	nde e e de em como e distinuira manazareza e e academica de por que que e e e e e e e e e e e e e e e e	Profession Story of the test of the security o	Last 4 digits of account number	4 9 2 6	\$ 5,716		
Nonpriority Creditor's Name POB 15298			When was the debt incurred?	11/02/2016			
Number Street WILMINGTON	DE	19850	As of the date you file, the claim	is: Check all that apply.			
City	State	ZIP Code	Contingent				
Who incurred the debt? Check o	ne.		Unliquidated				
Debtor 1 only			☐ Disputed				
Debtor 2 only			Type of NONPRIORITY unsecui	red claim:			
Debtor 1 and Debtor 2 only At least one of the debtors and a			Student loans				
			Obligations arising out of a sepa you did not report as priority clair	ration agreement or divorce that			
Check if this claim is for a collist the claim subject to offset?	ommunity debt		Debts to pension or profit-sharing	Debts to pension or profit-sharing plans, and other similar debts			
☐ No ☐ Yes			☑ Other. Specify CREDIT CA				
VIOTORIA OF OR TIOOR	When the state of		Last 4 digits of account number	1 2 3 8	_{\$537.}		
VICTORIA SECRET/CON Nonpriority Creditor's Name	/ENITY	· · · · · · · · · · · · · · · · · · ·	\$40.4m	11/30/2016			
POB 182273 Number Street			When was the debt incurred?	11/30/2010			
COLUMBUS	ОН	43218	As of the date you file, the claim	is: Check all that apply.			
City	State	ZIP Code	Contingent				
Who incurred the debt? Check or	ne.		Unliquidated Disputed				
Debtor 1 only			and an inches of the second				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecur	ed claim:			
At least one of the debtors and a	nother		Student loans Obligations origins out of a const	ation and an alternative at			
☐ Check if this claim is for a co	ommunity debt		Obligations arising out of a separ you did not report as priority clair Debts to pension or profit-sharing	ns			
Is the claim subject to offset?			Other, Specify CREDIT CA				

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Debtor 1

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List All of Your NONPRIORITY Unsecured Claims

The second of th	Do any creditors have nonpriority u No. You have nothing to report in t Yes	nsecured on this part. Su	claims against you	ou? he court with your other schedules.			
	List all of your nonpriority unsecure nonpriority unsecured claim, list the cruincluded in Part 1. If more than one crectains fill out the Continuation Page of	editor holds					
17	CONVERGENT HEALTHCAR	o E				Total	l claim
1-4	Nonpriority Creditor's Name	\L.	4	Last 4 digits of account number		\$	35.00
	121 NE JEFFERSON ST STE	100		When was the debt incurred?	06/12/2016		
- Constitution of the cons	PEORIA City	IL State	61602 ZIP Code	 As of the date you file, the claim 	is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only			Contingent Unliquidated Disputed	•		
	Debtor 1 and Debtor 2 only At least one of the debtors and another	r		Type of NONPRIORITY unsecu	red claim;		
	☐ Check if this claim is for a commu	inity debt		Obligations arising out of a separ	ation agreement or divorce		
	Is the claim subject to offset?			that you did not report as priority Debts to pension or profit-sharing	claims I plans, and other similar debts		
	☐ No ☐ Yes			Other, Specify MEDICAL B	ILL GOOD	•	
	CREDIT ONE BANK Nonpriority Creditor's Name POB 98873	and the control of th		Last 4 digits of account number When was the debt incurred?	1 4 4 7 12/14/2016	\$	1,554.00
	Number Street LAS VEGAS	NV	89193	As of the date you file, the claim	io: Chook all that and		edylonger tudes a
office and a separate of the s	City	State	ZIP Code	Contingent	із: Спеск ан тпат арріу.		
	Who incurred the debt? Check one.			☐ Unliquidated			
	Debtor 1 only Debtor 2 only			☐ Disputed			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		Page 1
	At least one of the debtors and another			☐ Student loans			
	Check if this claim is for a commun	nity debt		Obligations arising out of a separa that you did not report as priority of	ation agreement or divorce		ar phonosys is 1 AA
	Is the claim subject to offset?			Debts to pension or profit-sharing	plans, and other similar debts		
	☐ No ☐ Yes			Other, Specify CREDIT CAI	RD		
4	FIRST PREMIER BANK Nonpriority Creditor's Name	and the second s	Contractive Contractive States and Contractive States States States States States States States States States	Last 4 digits of account number		G npopulationimientiini	730.00
	301 S MINNESOTA AVE			When was the debt incurred?	12/14/2016	Ψ	
	SIOUX FALLS	SID State	57104 ZIP Code	As of the date you file, the claim is	s: Check all that apply.		TO COMPANY THE PARTY OF THE PAR
	Who incurred the debt? Check one.			Contingent			
	Debtor 1 only			Unliquidated Disputed			41
	Debtor 2 only Debtor 1 and Debtor 2 only			•			
	At least one of the debtors and another			Type of NONPRIORITY unsecure	ed claim:		
	Oheck if this claim is for a commun	ity debt		Student loans Obligations arising out of a separal	tion agreement or discoon		46.
	Is the claim subject to offset?			that you did not report as priority of	aims		
	□ No □ Yes			Debts to pension or profit-sharing p Other, Specify CREDIT CAF	plans, and other similar debts		
	the said formation of the first transfer to the first transfer to the first transfer to the first transfer to the first transfer to the first transfer to the first transfer to the first transfer to the first transfer to the first transfer transfer to the first transfer transfer to the first transfer	· Selected and a sele	t til vil 11 til till skille skille til skille skille skille skille skille skille skille skille skille skille	Andrew or the Control of the Control		M. N. S. S. S. S. S. S. S. S. S. S. S. S. S.	

Debtor 1

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Case number (if known)_

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority ur No. You have nothing to report in the Yes	nsecured on the part. Su	claims against yo bmit this form to th	u? e court with your other schedules.		
		ditor holds		order of the creditor who holds each claim. If a creditor han, for each claim listed, identify what type of claim it is. Do no list the other creditors in Part 3.If you have more than three no		
ſŌ	FSB BLAZE			0.5.7.5	Total c	laim
l	Nonpriority Creditor's Name	***************************************		Last 4 digits of account number 0 5 7 5	\$	395.00
	PO BOX 5096			When was the debt incurred? 08/24/2016		
	Number Street SIOUX FALLS	010		•		
	City	SD State	57117 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.			Contingent Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loans		
	Check if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	,	
	□ No			Other. Specify CREDIT CARD	,	
	Q Yes					1
4	MACYS	and annual purpose and annual control and substitution of the control of the cont	NII. Indoor e to make dy made annie 25 voor eeu make was annie oo see tarriig een kansii een ka maar een see s NII. Indoor e to make dy made annie 25 voor een make was annie oo see tarriig een ka maar een see see see see s	Last 4 digits of account number 4 0 5 6	**************************************	300.00
 ,	Nonpriority Creditor's Name			When was the debt incurred? 11/16/2016		
	POB 8218					
	Number Street					
	MASON	<u>OH</u>	05040	As of the date you file, the claim is: Check all that apply.		
	•	State	ZIP Code	Contingent		f. at a large
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		-
	At least one of the debtors and ariother			☐ Student loans		
	Check if this claim is for a commun	ata a ata ka		Obligations arising out of a separation agreement or divorce		eloormaren
		nty debt		that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify CREDIT CARD		
	Q Yes			a data. Opedity Ortizott Ortizo		
7	Traditional for reliable as an incompanie of execution is one or provide taking representations and companies and	2/2.4539164(4.ps.n.ph) sk.hespse cp.	mation of commission the contract of the contr		n disebel and dise	he/lithersomervenensersomerso)
	WALMART/SYNCHRONY Nonpriority Creditor's Name	***************************************		Last 4 digits of account number 3 1 0 6	¢	539.00
	POB 965024			When was the debt incurred? 11/20/2016	Φ	
	Number Street					
	ORLANDO	FL	32896	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code			
	Who incurred the debt? Check one.			Contingent		
	Debtor 1 only			Unfiquidated Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only					
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		over-taken.
				☐ Student loans		
	Check if this claim is for a communi	ity debt		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	□ No □ Yes			Other. Specify CREDIT CARD		
						
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List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority		_1_1			
	No. You have nothing to report in	inisecured	ciaims again	sst you?		
	Yes	uns part. S	upmit this for	n to the court with your other schedules.		
						urasianan
	nonpriority unsecured claim liet the co	d claims i	n the alphab	etical order of the creditor who holds each claim. If a creditor ha	s more than one	
	included in Part 1. If more than one or	editor holds	iralely for eac La barticular (encal order of the creditor who holds each claim. If a creditor ha h claim. For each claim listed, identify what type of claim it is. Do no claim, list the other creditors in Part 3.If you have more than three n	ot list claims alread	ly
	claims fill out the Continuation Page o	f Part 2.		note than three n	onpriority unsecur	ed
12	TD BANK USA/TARGET CR				Total claim	
بيمرا.	Nonpriority Creditor's Name	EDII		Last 4 digits of account number 7 9 0 5	4 000	00
	POB 673			When was the debt incurred? 12/04/2016	\$1,000	.00
	Number Street	·····		When was the dept incurred?		
	MINNEAPOLIS	MN	55440			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
				☐ Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			Disputed		
	Debior 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
	Check if this claim is for a commi	unity debt		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?			that you did not report as priority claims		
	□ No			□ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CREDIT CARD	3	
	☐ Yes			- Other, Specify - Transfer of the		
Ú	A district contraction with relative contract contract on legal contracts of the contract of t	PARTER VARIETINES IN THE PROPERTY OF	CHECKEN THE CANADA CHECKEN THE PROPERTY OF THE CHECKEN			ere en en en en en en en en en en en en en
7	US BANK Nonpriority Creditor's Name			Last 4 digits of account number 1 2 7 7	\$1,084.0	00
,				When was the debt incurred? 09/01/2016		
	PO BOX 108 Number Street					į
	SAINT LOUIS	MO	63166	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code			
	Who incurred the debt? Check one.			☐ Contingent ☐ Unliquidated		ĺ
	Debtor 1 only			☐ Disputed		
	Debtor 2 only			_ 5555666		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loans		
	Check if this claim is for a commu	militar at a last.		Obligations arising out of a separation agreement or divorce		ļ
		mry debt		that you did not report as priority claims		******
	is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		A PARTY CONTRACT
	O Yes			Other, Specify CREDIT CARD		
	イル (1985年) マイス (1985年) (1986年)		janen zur erselle in der gestelle sonderen der der gestelle der der der der der der der der der de			1
2	VERIZON WIRELESS			Last 4 digits of account number 7 9 7 0		
	Nonpriority Creditor's Name			When was the debt incurred? 11/30/2016	\$2,304.0	00
	POB 26055 Number Street			Mas the nent literited (11/20/50 10		
	MINNEAPOLIS	MN	55426			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.			☐ Contingent		1
	Debtor 1 only			☐ Unliquidated		-
	Debtor 2 only			Disputed		
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
		.14		Student loans		
	Check if this claim is for a commun	lity debt		Obligations arising out of a separation agreement or divorce		The second section
	Is the claim subject to offset?			that you did not report as priority claims		Tale de la constante de la con
	□ No □ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify CELL/COMMUNICATIONS		
	wai 7es			- Share opening GELLE GOINING MICHIGANS		
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Your NONPRIORITY Unsecured Claims — Continuation Page

GETTINGTON/WEBBA	NK		Last 4 digits of account number	0 4 3	7	s 1,162.0	
Nonpriority Creditor's Name 6250 RIDGEWOOD RD			When was the debt incurred?	<u>5</u>	· · · · · · · · · · · · · · · · · · ·		
Number Street SAINT CLOUD	MN	53030	As of the date you file, the claim is	: Check all th	at apply.		
Who incurred the debt? Check Debtor 1 only Debtor 2 only	State one.	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐ Type of NONPRIORITY unsecured	d otains.			
Debtor 1 and Debtor 2 only At least one of the debtors and	l another		Student loans				
☐ Check if this claim is for a Is the claim subject to offset? ☐ No ☐ Yes	community debt		 Obligations arising out of a separati you did not report as priority claims Debts to pension or profit-sharing p Other. Specify CREDIT CAR 	lans, and oth			
FEDERAL LOAN SERV	ICING CRED	ON November 17 on Parket Material Company November (1994 Active Control of Active Co	Last 4 digits of account number _2	<u> </u>		\$	
Nonpriority Creditor's Name POB 60610					_		
Number Street HARRISBURG	PA	17106	 As of the date you file, the claim is: 	: Check all tha	at apply.		
City	State	ZIP Code	Contingent		,		
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ✓ Student loans	claim:			
C At least one of the debtors and another C Check if this claim is for a community debt			Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
Is the claim subject to offset? No Yes			Other Specify REFINANCED)			
BIOREFERENCE LABO	RATORIES	and the state of t	Last 4 digits of account number	0 8	8	\$_1,795.00	
Nonpriority Creditor's Name 481 EDWARD H ROSS DRIVE		When was the debt incurred? 09/07/2016					
Number Street ELMWOOD PARK Dity	NJ State	07407	As of the date you file, the claim is:	Check all that	t apply.		
Who incurred the debt? Check of Debtor 1 only		ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured of Student loans	claim:			
At least one of the debtors and a Check if this claim is for a c			Obligations arising out of a separation you did not report as priority claims				
s the claim subject to offset?			☐ Debts to pension or profit-sharing pla ☑ Other, Specify MEDICAL BILL	ns, and other -	similar debts		

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Debtor 1

DOMINIQUE **LETISHA** First Name Middle Name

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Case number (#known)_

 -	 _	_	

Last Name

	Do any creditors have nonpriority un			?				
	No. You have nothing to report in th							
	☑ Yes	G. 1817 (10 18AN)						
	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre- included in Part 1. If more than one cred claims fill out the Continuation Page of I	ditor separa litor holds a	tely for each claim	 For each claim listed, identify who 	at type of claim it is. Do not	list cia	ims already	
1/ a						Tota	ii claim	
14	TRANSWORLD SYSTEMS COLLECTIONS Nonpriority Creditor's Name			Last 4 digits of account number	6 8 4 0	¢	436.14	
	507 PRUDENTIAL RD Number Street			When was the debt incurred?	11/30/2016	Ψ		
	HORSHAM City	PA State	19044 ZIP Code	As of the date you file, the claim	is: Check all that apply.			
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only			Contingent Unliquidated Disputed				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:			
	At least one of the debtors and another			Student loans				
	Check if this claim is for a commu	nity debt		Obligations arising out of a separ that you did not report as priority				
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts				
	☐ No ☐ Yes			Other. Specify Collection E	NTERPRISE Rent			
h	An Challens designed by the med state (1) the time of time of time of the time of	enconcrete approximate out of the contract of	mody/museusept-stransmysteratestatestatestatestatestatestatesta		Activativolentiviti Abottolentolentetia in seemas kasonistentetia suominentetia suomanassa suomanassa suomanas	on three speciments have been been	American descriptions of the second s	
20	GREAT LAKES HIGHER EDUCATION Nonpriority Creditor's Name			Last 4 digits of account number	1 7 7 7 11/30/2016	\$	78,611.00	
	PO BOX 7860		When was the debt incurred?	17/30/2010				
	Number Street MADISON	WI	53707	As of the date you file, the claim	is: Check all that apply.			
	City	State	ZIP Code	☐ Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only			☐ Disputed				
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another			☑ Student loans				
	Check if this claim is for a community debt			Obligations arising out of a separathat you did not report as priority				
	Is the claim subject to offset?			Debts to pension or profit-sharingOther, Specify	plans, and other similar debts			
	LI No CI Yas			Other, Specify	 		•	
3	e Andrews (1) Enthals de mais de Collège (Andrews de l'experience) est transfer du ballet du l'été de l'est plant de mais de Collège (Andrews de C	Принтийну на принтина на принтина на принтина на принтина на принтина на принтина на принтина на принтина на п Принтина на принтина на пр			A THE COMMON PARTY OF THE PROPERTY OF THE PROP	Carrella Supraelle		
_1_i	CONVERGENT Nonpriority Creditor's Name			Last 4 digits of account number		\$	2,695.47	
	800 SW 39TH ST/POB 9004			When was the debt incurred?	11/23/2016			
	RENTON	WA	98057	A P 44 4 4*				
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.			
	Who incurred the debt? Check one.			☐ Contingent☐ Unliquidated				
	Debtor 1 only			Disputed				
	Debtor 2 only Debtor 1 and Debtor 2 only							
	At least one of the debtors and another			Type of NONPRIORITY unsecu	red claim:			
	Check if this claim is for a community debt			Student loansObligations arising out of a separa	ation agreement or divorce			
	Is the claim subject to offset?			that you did not report as priority of	claims			
	□ No			Debts to pension or profit-sharing Other. Specify COLLECTIC			and the state of t	
	☐ Yes			Uner. Specify COLLECTIC	NV/US CELLUAR		AVV.	
							ž.	

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Debtor 1

LETISHA First Name

DOMINIQUE Middle Name

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Your NONPRIORITY Unsecured Claims - Continuation Page

A 9 ****							
AMEREN ILLINOIS Nonpriority Creditor's Name			Last 4 digits of account number 2 0 3 8				
POB 88034			When was the debt incurred? 10/26/2016				
Number Street CHICAGO			Ac of the data was 5th the second				
Dity	IL State	60680 ZIP Code	As of the date you file, the claim is: Check all that apply.				
Who incurred the debt? Check one. Debter 1 only		Zii Gode	Contingent Unliquidated Disputed				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
At least one of the debtors and anot	ther		Student loans				
Check if this claim is for a com	munity debt	•	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
s the claim subject to offset?	manity debi	•	Debts to pension or profit-sharing plans, and other similar debts				
D No			☑ Other. Specify UTILITY				
2 Yes							
(INDRED LLC	STANDARD OF THE STANDARD PROPERTY.	likika ataukun 1944 (1440 a. aanta merapa) (1640 alah ataukun atengan labukun 1940 alah atau tanuar	Last 4 digits of account number 2 8 0 5				
onpriority Creditor's Name							
806 N KNOXVILLE AVE			When was the debt incurred? 11/30/2016				
EORIA	IL	61604	As of the date you file, the claim is: Check all that apply.				
ty	State	ZiP Code	Contingent				
ho incurred the debt? Check one.			Unliquidated				
Debtor 1 only			Disputed				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only At least one of the debtors and anoth	er.		☐ Student loans				
			Obligations arising out of a separation agreement or divorce that				
Check if this claim is for a comm	nunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
the claim subject to offset?			☑ Other Specify MEDICAL BILL				
Yes							
	Biganian N. S. C. Street and All all all all all all all all all all						
TELLAR RECOVERY INC			Last 4 digits of account number 7 2 8 3				
npriority Creditor's Name OB 48370			When was the debt incurred?				
nber Street ACKSONVILLE	FL	32247	As of the date you file, the claim is: Check all that apply.				
i	State	ZIP Code	Contingent				
to incurred the debt? Check one.			Unliquidated				
Debtor 1 only			☐ Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only At least one of the debtors and anothe			☐ Student loans				
Check if this claim is for a commi			Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
he claim subject to offset?	unity debt		Debts to pension or profit-sharing plans, and other similar debts				
			Other. Specify Collections-COMCAST				

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Debtor 1

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Carte List All of Your NONPRIORITY Unsecured Claim

			secureu Cia	11/113	
3.	Do any creditors have nonpriority u	nsecured o	laims agains	t vou?	
	No. You have nothing to report to t	hic nort Cu	hmit this farm	to the court with your other schedules.	
	Yes	ans part. Su	DUIL THE JOHN	to the court with your other schedules.	
			eé ezteketősőkik eléreken	Programma in the control of the co	\$2000 \$2000
4.	List all of your nonpriority unsecure	d claims in	the alphabel	tical order of the creditor who holds each claim. If a creditor ha	A
			a particular cl	aim, list the other creditors in Part 3.If you have more than three no	anor ciamis already
	claims fill out the Continuation Page of	Part 2.			inpriority discouled
					Total claim
2	CHECK N GO COLLECTION	S		Last 4 digits of account number 2 5 2 3	And the second s
•	Nonorlority Creditor's Name			Last 4 digits of account number 2 3 2 3	s 1,862,04
	7755 MONTGOMERY ROAD	STE 400		When was the debt incurred?	Ψ
	Number Street	011. 400		M	
	CINCINNATI	ОН	45236		
	City	State	43230 ZIP Code	An of the data year file the all-land on the same	
	•	Olate	ZIP Code	As of the date you file, the claim is: Check all that apply.	
	167			☐ Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			Disputed	
	Debtor 2 only			· · · · · · · · · · · · · · · · · · ·	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	r			
				Student loans	
	Check if this claim is for a commu	inity debt		Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?			that you did not report as priority claims	
	□ No			Debts to pension or profit-sharing plans, and other similar debts	i e
	Q Yes			Other. Specify PAYDAY LOAN	
	tend 155				
	。""我们就是一个人,我们们的人,我们就是一个人,他们就没有一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们们就是一个人,我们就是一个人,我们就是一	COMETICATION PROPERTY OF THE STREET PROPERTY	timentics is also to waiting the principal action in the contract of the contr		en de la company
				Last 4 digits of account number	\$
	Nonpriority Creditor's Name			When was the debt incurred?	
	Number Street				
				As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			•	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			☐ Student loans	
	Check lethic alone to a			Obligations arising out of a separation agreement or divorce	,
	Check if this claim is for a commu	nity debt		that you did not report as priority claims	1
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
	□ No			Other. Specify	and mayor
	Q Yes			-	
1	er (film er er et aller) de de la ment, es pregnete et claim à moint de mes propriée de la moint de mes propriée de la constitue de la constit	NO VIEW OF THE PERSON ASSESSED	ik no storanjaji ojenjaji ovojnanjanoskom oktimosti odlovija		T00 00 / 100 T00 100 100 100 100 100 100 100 100
				Last 4 digits of account number	
	Nonpriority Creditor's Name				\$
				When was the debt incurred?	
	Number Street			AND AND AND AND AND AND AND AND AND AND	
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.	· ·
				☐ Contingent	
	Who incurred the debt? Check one.				To the second se
	Debtor 1 only			Unliquidated	
	Debtor 2 only			☐ Disputed	
	Debtor 1 and Debtor 2 only			_	***
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:	Topingol in
				☐ Student loans	
	Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?			that you did not report as priority claims	
	No			Debts to pension or profit-sharing plans, and other similar debts	
	Q Yes			Other. Specify	
	166 (€ 3)				
	and got a first one conceptables employ 100% homewhat about manners and				ļ

Document

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Debtor 1

LETISHA First Name

DOMINIQUE

HARRIS

Case number (if known)_

List Others to Be Notified About a Debt That You Already Listed

	,00 00 1101 11010 00011101101	persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Numb		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	**************************************	Part 2: Creditors with Nonpriority Unsecured Claim
***************************************		Last 4 digits of account number
City	State ZIP Coc	e
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZiP Coo	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
lame		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
>ity	State ZIP Coc	Last 4 digits of account number
ar historie Sule Sule Sule Sule Sule Sule Sule Sul	\$ + HAPPER \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	On which entry in Part 1 or Part 2 did you list the original creditor?
Vante		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		☐ Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Coo	
ngga pagaman (19 mener 19 per 9 mener) a pagaman kapanan ya kerin ngga mananda e an menerikan sababah sababan	magnetische State der von der der von der einstelle der Kontakt der State der State der State der State der St	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Coo	Last 4 digits of account number
en vysig en te felicie fan væl da pelicia ar he sold over all an heef an da en sold om en en en en en en en en	TO THE STATE OF TH	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ⁶ ZIP Coc	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		•
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims Claims
City	State ZIP Coo	Last 4 digits of account number

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Debtor 1

LETISHA First Name

DOMINIQUE

Document HARRIS

Case number (if known)_

Part 4

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	€b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	Total claim	78,611.00
Total claims from Part 2	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		78,611.00 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority	•	\$	**************************************
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other	6g.	\$	0.00

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Debtor	LETISHA	DOMINIQUE	HARRIS	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse If filing)	First Name	Middle Name	Lest Name	
United States I	Bankruptcy Court	t for the: Northern District o	of Illinois	×
Case number (frknown)				

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person (or company wi	ith whom you	have the contract or lease	State what the contract or lease is for
2.1			and the second second second second second	an eng an en ang an an an an an an an an an an an an an	
	Name				-
	Number	Street			-
	City		State	ZIP Code	THE PROPERTY AND PROPERTY AND ADDRESS AND
2.2					
	Name				•
	Number	Street			-
: 4:57 4:54 TS-3	City		State	ZIP Code	
2.3				en de la companya de la partir de la partir de la companya del la companya del la companya de la	製造の中であっている。日本の中では、中では、中では、中では、中では、中では、中では、中では、中では、中では、
	Name				
	Number	Street			
Photograph in port	City	nt elektriske jan januar state jakon naka kan proje	State	ZIP Code	
2.4					- 1700-06-04-02-0-170-08-0-170-08-0-170-08-0-170-08-08-08-08-08-08-08-08-08-08-08-08-08
	Name				
	Number	Street			
statement page	City	69/cillingshottes torrescio accessoro	State	ZIP Code	
2.5			a		
·	Name				
	Number	Street			
	City	Na restricta de la traja respecta compaga	State	ZIP Code	

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Debtor 1

Leti	Sha	Don	inique	-tlami	5
First Name	\$√ī à	ddle Name	Last Name		************

Case number (if known)		
OBSETIGITIDEL (ILKNOWN)		

		Additional Pa	≋ge if You H	ave More Contracts or Lea	ases
				have the contract or lease	What the contract or lease is for
2.	the state of the s	karantak ng ministrapony ng tropy tr			
	Name				
	Number	Street	- · · · · · · · · · · · · · · · · · · ·		
	City		State	ZIP Code	Address
2	Journal of the second second	the Contraction of Contraction Section 1987 (1987) and the contraction of Contraction 1987 (1987) and the contraction 1987 (1987) and the contraction 1987 (1987) and the contraction 1987) and the contraction 1987 (1987) an	aminani dankan (ammagan dan dan dan mengala	TOTAL TO SHARM AND THE SHARM	
	Name				
	Number	Street			
	City		State	ZiP Code	
 >	. K. Leighert der Weiter P. Scott	era anti-anti-anti-anti-anti-anti-anti-anti-	CONTRACTOR OF THE PROPERTY OF	21F CODE	
	Name				
	Number	Street			
		O TOOL			
	City	DI NISHORIN SENION SINISH SINI	State	ZIP Code	Nobel Friends Advangery vs. 000 (200 pt.) and sub-improved to 200 pt. 000 pt.
	Name	**************************************			
	Number	Street			
	City		State	ZIP Code	
				e ar provincia al la companiente de production de production de la companiente del la companiente del la companiente de la companiente de la companiente de la companiente del la companiente de la companiente de la companiente de la companiente de la companiente de la companiente de la companiente de la companiente de la companiente de la companiente de la companiente de la companiente de la companiente de	representations of the contract of the contrac
	Name				MANAGEMENT.
	Number	Sireet			
	City		State	ZIP Code	
	20 A villet bet Nation für zuwerzet zuwer	rus delle i dell'illusio internetti e petetteri museori, processi	િલ કર્મના જ્યાર જાણા કરવા છે. જિલ્લા માટે જ્યાર જાણા કરવા છે. જે જાણા કરવા છે. જે જાણા કરવા છે. જો જાણા કરવા છે. જો જો જાણા કરવા છે. જે જો જ	- Therefore the CO III that foregots respect to the entire season of a control of the presence of accompanion of the entire season of t	
	Name				
	Number	Street			MATERIAL STATE OF THE STATE OF
	City	Maria de la companya del companya de la companya del companya de la companya de l	State	ZIP Code	
 [Constitution of the section of the s	a 1947 - Anni America (1940), a gaire an ann an Aireann an Aireann an Aireann an Aireann an Aireann an Aireann	gg i ngo ga an wang da sakingga i 25 dh pagin da malalishin d	2003-01-01-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
ord.	Name				
	Number	Street			
	City		State	ZIP Code	of the following state of the s
		the entire temper to entire the state of the content of the state of t			
	Name				
	Number	Street			

City

State

ZIP Code

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Fill in this in	nformation to i	dentify your case:				
Debtor 1	LETISHA First Name	DOMINIQUE Middie Name	HARRIS Last Name			
Debtor 2 (Spouse, if filing)) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Northern District of Illinois						
Case number (If known)						

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

case	number (if known). Ans	wer every question.		
1,	Do you have any codebt ☑ No □ Yes	ors? (If you are filing a joint case, do not	t list either spouse as a	a codebtor.)
2.		have you l <mark>ived in a community propert</mark> , Louisiana, Nevada, New Mexico, Puert		(Community property states and territories include ngton, and Wisconsin.)
	No. Go to line 3.			
		, former spouse, or legal equivalent live v	with you at the time?	
	Q No			
	Yes. In which com	nmunity state or territory did you live?	, F	Fill in the name and current address of that person.
	Name of your spouse,	former spouse, or legal equivalent		
	Number Street			
	City	State	ZIP Code	
	-			f your spouse is filing with you. List the person
		ule G to fill out Column 2.		e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				Schedule D, line
	Name			Schedule E/F, line
	Number Street			Schedule G, line
	City	State	ZIP Code	
3.2				Schedule D, line
	Name			Schedule E/F, line
	Number Street			Schedule G, line
	City	State	ZIP Code	
3.3				Charles and Charles
	Name			Schedule D, line
	Number Street			Schedule E/F, line
				·
	City	State	ZIP Code	Schedule E/F, line

Debtor 1

B 4 11

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Leticia Dominique Harris

First Name Last Name Case number (if known)

	Column	1: Your codebtor				
-					e i C	plumn 2: The creditor to whom you owe the debt
3					C	heck all schedules that apply:
	Name				[Schedule D, line
						Schedule E/F, line
	Number	Street				Schedule G, line
	City	A CONTRACTOR OF THE CONTRACTOR	State	ZIP Code	***************************************	
	Name					Schedule D, line
						Schedule E/F, line
	Number	Street				Schedule G, line
·	City		State	ZIP Code		
-			The state of the s	E.F. COUC		
	Name					Schedule D, line
	Number					Schedule E/F, line
	Number	Street			- 0	Schedule G, line
	City		State	ZIP Code		
_	Name					
	(Valifie					Schedule D, line
	Number	Street			- 0	Schedule E/F, line Schedule G, line
	City					
	er i vilinden en er en en en en en en en en en	te de la companya y de la desembanga de persona en proprio de la mengrapisado de mengrapis de l'accesso de la c	State	ZIP Code		
	Name				_ 0	Schedule D, line
						Schedule E/F, line
	Number	Street				Schedule G, line
7	City		State	ZíP Code		
- Andrews	Vame				П	Schodule D. E.
						Schedule D, line Schedule E/F, line
,	Number	Street				Schedule G, line
	City		State			·····
	War - in comment water 1 and	The second secon	SIZE SIZE SIZE SIZE SIZE SIZE SIZE SIZE	ZIP Code	All and a reliant to the consequence of	
Ĭ	lame	THE STATE OF THE S				Schedule D, line
	 					Schedule E/F, line
1	iumber	Street			. 📵 :	Schedule G, line
[ity		State	ZIP Code		
	ame					School de D. B.
15	a:11 e		-			Schedule D, line
Ň	umber	Street				Schedule E/F, line Schedule G, line
_					_ `	
C	ty		State	ZIP Code		

Fill in this i	nformation to identif	/ your case:					
Debtor 1	LETISHA	DOMINIQUE	HARRIS				
Debtor 2	First Name	Middle Name	Lasi Name				
(Spouse, if filing		Middle Name	Lasi Name				
		; Northern District of Illinois	FINANCE:		Ob a strict abo	:_ 1 _,	
Case number (If known)			***		Check if thi An ame		
Signature a manuscolous de democratica en entre de destinación de destinación de destinación de destinación de		Michael Andrews - shi mad destruction belonded to a basic state and account of the destruction for	**************************************	***************************************	A suppl	ement showing postpetition chapter 1 as of the following date:	3
Official F		_			MM / DD	D/ YYYY	
Sche	iule I: Yo	ur Income				12/15	
supplying co	errect information. If y parated and your spo	you are married and not ouse is not filing with you se top of any additional p	filing jointly, and yo u, do not include inf	ur spouse is ormation abo	living with your spou	 2), both are equally responsible for ou, include information about your spot se. If more space is needed, attach a nown). Answer every question. 	Jse.
Fill in you informati	ır employment on.		Debtor 1			Debtor 2 or non-filling spouse	(4) (5) (6) (6)
attach a s	re more than one job, separate page with on about additional s.	Employment status	☑ Employed ☐ Not employ	ed		☐ Employed ☐ Not employed	
	art-time, seasonal, or oved work.		1) ma Fm pm pm pm pm 21 /F				
Occupation	on may include student naker, if it applies.	Occupation t	UBER DRIVE	ER - CONT	RACI		
		Employer's name	UBER				
		Employer's address	Number Street	thet 3	trept	Number Street	·
			San Francity	Sco CA State ZIP	94103 Code	City State ZIP Code	
		How long employed to	here? 30 DAYS			30 DAYS	
Part 2:	Give Details Abou	ıt Monthly Income					
spouse u	nless you are separate	d.				te \$0 in the space. Include your non-filing	
		have more than one emplo attach a separate sheet to		Jagaraggera			
O limit-re-	at faith a sea an ann an an an an an an an an an an a	None and same testing	/hoforo oll payme!!	Foi	Debtor 1	For Debtor 2 or non-filing spouse	
		alary, and commissions of the control of the contro		2. \$	0.00	\$	
3. Es timat	e and list monthly ov	ertime pay.		3. +\$	0.00	+ \$	
4. Calculat	æ gress income. Add	line 2 + line 3.		4. \$	0.00	\$	

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Debtor 1

LETISHA

DOMINIQUE

HARRIS Case number (if known) First Name For Debtor 1 For Debtor 2 or non-filing spouse 0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 0.00 5a. 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 0.00 5c. 5d. Required repayments of retirement fund loans 0.005d. 5e. Insurance 0.00 5e. 5f. Domestic support obligations 0.00 5f. 5g. Union dues 0.00 5g. 5h. Other deductions. Specify: _ 0.00 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 575.00 monthly net income. 8a 8b. Interest and dividends 0.00 8ь. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8¢. 8d. Unemployment compensation 0.00 8d. 8e. Social Security 8e. 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 0.00 8f. 8g. Pension or retirement income 8g. 0.00 8h. Other monthly income. Specify: 8h. 0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. 575.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 575.00 0.00 575.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 11 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 575.00 12 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ■ No. Loss job this year in Peoria and currently pregnant. Recently took UBER job but will not be able to work Yes. Explain: as pregancy progresses

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Fill in this information to identify	/ your case:				
Debtor 1 LETISHA	DOMINIQUE H	ARRIS			
First Name Debtor 2	Middle Name Last f		Check if this is:		
(Spouse, if filing) First Name	Middle Name Last N	lame	An amended	•	
United States Bankruptcy Court for the:	Northern District of Illinois			nt showing post of the following	petition chapter 13 g date:
Case number (If known)			MM / DD / YY		•
Official Form 106J	The state of the s				
Schedule J. Yo	ur Expenses				12/15
Be as complete and accurate as p information. If more space is need (if known). Answer every question	ed, attach another sheet to this	are filing together, s form. On the top	both are equally respon of any additional pages	sible for supply , write your nam	ring correct ne and case number
Fati is Describe Your Hor	usehold				
1. is this a joint case?					
No. Go to line 2. Yes. Does Debtor 2 live in a:	separate household?				
☐ No					
☐ Yes. Debtor 2 must fil	le Official Form 106J-2, Expense	s for Separate Hous	ehold of Debtor 2.		
2. Do you have dependents?	Pr No (current p	regnant)			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information each dependent	on for Debtor 1 or E	relationship to Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents'	,			***************************************	☐ No ☐ Yes
names.					☐ No
					☐ Yes
					□ No
					☐ Yes
					☐ No
					☐ Yes
		***************************************	Harderhan.		No Yes
3. Do your expenses include					· · · · · · · · · · · · · · · · · · ·
expenses of people other than yourself and your dependents?	☑ No ☐ Yes				
	ing Monthly Expenses		t 1991 in tradition and de femáles des phage foy degranges quality de conjunction para compress comp	THE STATE POAR POATPERS OF A LONG TO STATE OF A STATE O	
Estimate your expenses as of your			£	Ob t 20 -	
expenses as of a date after the bar applicable date.					
Include expenses paid for with nor	n-cash government assistance	if you know the va	lue of	este de la constante de la cons	Terversijakseringserieren intervense
such assistance and have included				Your expe	nses
4. The rental or home ownership any rent for the ground or lot.	expenses for your residence. In	nclude first mortgage	payments and 4.	\$	0.00
if not included in line 4:					
4a. Real estate taxes			4a.	\$	0.00
4b. Property, homeowner's, or r	enter's insurance		4b.	\$	0.00
4c. Home maintenance, repair,	and upkeep expenses		4c.	\$	0.00
4d. Homeowner's association or	condominium dues		Art	\$	0.00

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Debtor 1 Letisha Domingue Harris
First Name Middle Name Last Name

Case number (if known)_____

:			Your exp	enses
	5. Additional mortgage payments for your residence, such as home equity loans	5,	\$	0.00
	6. Utilities:	-		
:	6a. Electricity, heat, natural gas	e	r.	0.00
	6b. Water, sewer, garbage collection	6a	T	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6b.	T	
	6d. Other, Specify:	6c. 6d.	·	
	7. Food and housekeeping supplies	7.	\$ \$	
, 8	3. Childcare and children's education costs			
: {	2. Clothing, laundry, and dry cleaning	8.	\$	
10		9.	\$	
13	Medical and dental expenses	10.	\$	
12	The state of the s	11.	\$	10.00
	Do not include car payments.	12.	\$	300.00
13	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14		14.	\$	
15		14,	Ψ	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	. \$	0.00
	15b. Health insurance	15b,	\$	0.00
	15c. Vehicle insurance	15c.		
	15d. Other insurance. Specify:	15d.		0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:	10.	***************************************	
:	17a. Car payments for Vehicle 1	47-	\$	0.00
	17b. Car payments for Vehicle 2	17a.		
	17c. Other Specify:	17b.	\$	0.00
	17d. Other. Specify:	17c.	\$	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	17d.	\$	0.00
	•	18.	\$	0.00
	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
26.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco	me.	·	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20b. 20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20a. 20e.	\$	0.00

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21. Other Sp	pecify:	21.	+\$	0.00
2. Calculate	your monthly expenses.			
2 2 a. Add	lines 4 through 21,	22a.	\$	551.00
2 2 b. Cop y	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
2 2 c. Add	line 22a and 22b. The result is your monthly expenses.	22c.	\$	551.00
23, Calculate	your monthly net income.			F7F 00
23a. Cop	y line 12 (your combined monthly income) from Schedule I.	23a.	\$	575.00
23b. Cop	y your monthly expenses from line 22c above.	23b.	-\$	551.00
	tract your monthly expenses from your monthly income. result is your monthly net income.	23c.	\$	24.00
Fo r examp	spect an increase or decrease in your expenses within the year after you file this to	ır		
	payment to increase or decrease because of a modification to the terms of your mortga	ge?		
₩o.	Currently prognant and will have a dependent in a face	aatha whiah	vill inorono	o household
₩ Yes.	Explain here: Currently pregnant and will have a dependent in a few m size. Move home with parents after job loss but plan to li	ive independe	will increase ently in the	e nousenola future with

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ebtor 1	LETISHA	DOMINIQUE	HARRIS	
	First Name	Mkidie Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court	for the: Northern District	of Illinois	
Case number				

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an a	attorney to help you fill out bankruptcy forms?
No Yes. Name of person VERNICE WARREN	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the that they are true and correct.	summary and schedules filed with this declaration and
Signature of Debior 1	Signature of Debtor 2
Date 12/14/2016	Date

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ill in this information to identify your case:			
Deptor 1 LETISHA DOMINIQUE Flist Name Middle Name	HARRIS Last Name	MANAGANA Anna na	
ebtor 2 pouse, if filing) First Name Middle Name			
ouse, if filing) First Name Middle Name Middle Name Middle Name Middle Name	Last Name		
	OF IRINOIS		
se number known)			Check if this is an amended filing
			-
ficial Form 107			
	irs for Indiv	iduals Filing for Bankrupt	CV 04/16
rmation. If more space is needed, attach a sepa	arried people are filing arate sheet to this for	g together, both are equally responsible for sup m. On the top of any additional pages, write you	plying correct ir name and case
nber (if known). Answer every question.			
Give Details About Your Marital S	inius and lithaus W	and the different	
Can one person would fell marital 5	tatus and where Y	ou Lived Before	
What is your current marital status?			
C Married			
☐ Married ☐ Not married			
☐ Married ☐ Not married During the last 3 years, have you lived anywhere	re other than where y	ou live now?	
☐ Married ☐ Not married During the last 3 years, have you lived anywher ☐ No			
☐ Married ☐ Not married During the last 3 years, have you lived anywher ☐ No ☐ Yes. List all of the places you lived in the last 3	3 years. Do not include	where you live now.	
☐ Married ☐ Not married			Dates Debtor 2 lived there
☐ Married ☐ Not married During the last 3 years, have you lived anywher ☐ No ☐ Yes. List all of the places you lived in the last 3	3 years. Do not include Dates Debtor 1	where you live now.	lived there
☐ Married ☐ Not married During the last 3 years, have you lived anywher ☐ No ☐ Yes. List all of the places you lived in the last 3	3 years. Do not include Dates Debtor 1 lived there	where you live now. Debtor 2:	lived there Same as Debtor 1
☐ Married ☐ Not married During the last 3 years, have you lived anywher ☐ No ☐ Yes. List all of the places you lived in the last 3 ☐ Debtor 1: ☐ 5813 N LINDENWOOD Number Street	Dates Debtor 1 lived there	where you live now. Debtor 2:	lived there Same as Debtor 1 From
☐ Married ☐ Not married During the last 3 years, have you lived anywher ☐ No ☐ Yes. List all of the places you lived in the last 3 ☐ Debtor 1: 5813 N LINDENWOOD	3 years. Do not include Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1	lived there Same as Debtor 1
☐ Married ☐ Not married During the last 3 years, have you lived anywher ☐ No ☑ Yes. List all of the places you lived in the last 3 ☐ Debtor 1: ☐ 5813 N LINDENWOOD ☐ Number Street	Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1	lived there Same as Debtor 1 From
☐ Married ☐ Not married During the last 3 years, have you lived anywher ☐ No ☐ Yes. List all of the places you lived in the last 3 ☐ Debtor 1: ☐ 5813 N LINDENWOOD ☐ Number Street #250	Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1	lived there Same as Debtor 1 From
☐ Married ☐ Not married During the last 3 years, have you lived anywher ☐ No ☐ Yes. List all of the places you lived in the last 3 ☐ Debtor 1: ☐ 5813 N LINDENWOOD ☐ Number Street #250 ☐ PEORIA IL 61615	Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1 Number Street	lived there Same as Debtor 1 From
□ Married □ Not married During the last 3 years, have you lived anywher □ No □ Yes. List all of the places you lived in the last 3 □ Debtor 1: □ 5813 N LINDENWOOD Number Street #250 □ PEORIA IL 61615 □ City State ZIP Code	Dates Debtor 1 lived there From 05/2014 To 09/2016	where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	Ilved there Same as Debtor 1 From To Same as Debtor 1
During the last 3 years, have you lived anywher No Yes, List all of the places you lived in the last 3 Debtor 1: 5813 N LINDENWOOD Number Street #250 PEORIA IL 61615	Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP Code	Ived there Same as Debtor 1 From To

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

City

State

ZIP Code

M No

City

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

State ZIP Code



Explain the Sources of Your Income

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DF 1 LETISHA DOMINIQUE First Name Middle Name Li	HARRIS ast Name	Case nu	mber (# known)	
	dayda da a da a da a da a da a da a da			
Did you have any income from employm Fill in the total amount of income you receiv If you are filing a joint case and you have in	ved from all jobs and all bus	inesses, including part-tir	me activities.	ndar years?
☐ No ☑ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$	Wages, commissions, bonuses, tips Operating a business	\$
For last calendar year:	Wages, commissions, bonuses, tips	s 27,479.00	Wages, commissions, bonuses, tips	\$
(January 1 to December 31,2015)	Ψ	Operating a business	
	☑ Wages, commissions,		Wages, commissions, bonuses, tips	_
For the calendar year before that:	oonuses, iids			
Did you receive any other income during include income regardless of whether that i unemployment, and other public benefit page.	income is taxable. Example yments; pensions; rental inc	ious calendar years? s of other income are alin come; interest; dividends;	Operating a business nony; child support; Social money collected from laws	uits; royatties; and
Did you receive any other income during include income regardless of whether that i unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from	operating a business I this year or the two previnceme is taxable. Example yments; pensions; rental incling a joint case and you have	ious calendar years? s of other income are alin come; interest; dividends; re income that you receive	Operating a business nony; child support; Social money collected from laws ed together, list it only once	suits; royatties; and
Did you receive any other income during include income regardless of whether that is unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from	operating a business I this year or the two previnceme is taxable. Example yments; pensions; rental incling a joint case and you have	ious calendar years? s of other income are alin come; interest; dividends; re income that you receive	Operating a business nony; child support; Social money collected from laws ed together, list it only once	suits; royatties; and
(January 1 to December 31, 2014 WYYY Did you receive any other income during include income regardless of whether that i unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from	of this year or the two previnceme is taxable. Example yments; pensions; rental inding a joint case and you have n each source separately.	ious calendar years? s of other income are alin come; interest; dividends; re income that you receive	Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4.	suits; royatties; and
Did you receive any other income during include income regardless of whether that i unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from No	Debtor 1 Sources of Income Describe below.	ious calendar years? s of other income are alincome; interest; dividends; re income that you receive to not include income that Gross income from each source (before deductions and	Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income	Gross Income from each source (before deductions and
(January 1 to December 31, 2014 WYY Did you receive any other income during include income regardless of whether that is unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from No Yes. Fill in the details.	Debtor 1 Sources of Income Describe below.	ious calendar years? s of other income are alincome; interest; dividends; re income that you receive to not include income that Gross income from each source (before deductions and	Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
(January 1 to December 31, 2014 WYY Did you receive any other income during include income regardless of whether that is unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from No Yes. Fill in the details.	Debtor 1 Sources of Income Describe below.	ious calendar years? s of other income are alincome; interest; dividends; re income that you receive to not include income that Gross income from each source (before deductions and	Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
Did you receive any other income during include income regardless of whether that i unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from No Yes. Fill in the details. From January 1 of current year untit the date you filed for bankruptcy:	Debtor 1 Sources of Income Describe below.	ious calendar years? s of other income are alin come; interest; dividends; re income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$	Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
Did you receive any other income during include income regardless of whether that i unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from No Yes. Fill in the details. From January 1 of current year untit the date you filed for bankruptcy:	Debtor 1 Sources of Income Bescribe below.	ious calendar years? s of other income are alincome; interest; dividends; re income that you receive to not include income that Gross income from each source (before deductions and	Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
Did you receive any other income during Include income regardless of whether that i unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from No Yes. Fill in the details. From January 1 of current year untit the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,2015 YYYY	Debtor 1 Sources of Income Bescribe below.	ious calendar years? s of other income are alin come; interest; dividends; re income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$	Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
Did you receive any other income during include income regardless of whether that i unemployment, and other public benefit pay gambling and lottery winnings. If you are fill List each source and the gross income from No Yes. Fill in the details. From January 1 of current year untit the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,2015	Debtor 1 Sources of Income Bescribe below.	ious calendar years? s of other income are alin come; interest; dividends; re income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$	Operating a business nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and

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Debtor 1

)ebt	or 1	LETISHA First Name	DOMINIQUE	Last Name	ARRIS	Case	e number (if known)	
				Lost Walle				
	rt 3:	List Certai	n Payments Yo	u Made Befo	ore You Filed	for Bankruptcy		
			or Debtor 2's de					
	₩ No.	mounted by	an individual prima	aniy for a perso	onal, family, or ne	ousehold purpose."	are defined in 11 U.S.C. § 101	(8) as
				filed for bankrı	iptcy, did you pa	y any creditor a total o	of \$6,425* or more?	
		No. Go te						
			s conduct you paid	mai Cieditol. L	zo noi inclune na	VMANTS for domastic s	e or more payments and the support obligations, such as this bankruptcy case.	
		* Subject to a	adjustment on 4/0°	1/19 and every	3 years after tha	it for cases filed on or	after the date of adjustment.	
	☐ Yes.		Debtor 2 or both					
		During the 90	days before you	filed for bankru	ptcy, did you pa	y any creditor a total o	f \$600 or more?	
		No. Go to				•	,	
		OICC	mor, wo not engling	e payments for	- domestic suppo	600 or more and the to the obligations, such as for this bankruptcy ca	otal amount you paid that s child support and ese.	
					insalatiataanana	Herri Alemania a di Santania di Santania di Santania di Santania di Santania di Santania di Santania di Santani		Mark Comment received Authorities and Authorities
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
		Creditor's	Name			\$	\$	☐ Mortgage
								☐ Car
		Number	Street	· · · · · · · · · · · · · · · · · · ·	****			Credit card
		***************************************	· · · · · · · · · · · · · · · · · · ·					Loan repayment
								Suppliers or vendors
		City	State	ZIP Code				Other
		11.11.11.11.11.11.11.11.11.11.11.11.11.	to the use the sortes especial error environment of the service of the pro-	tting to be a second topic of a tight of a second second	ting the temperature of the transfer and a second of the s	tid. Educater til stater kvirt frågninga anna sav til en så flere å kvit åresen.	Анта и менен желери тур 14 ба ой он жене очетур 16,200 а быта, менены од органуу 6,444, 80, дей	rente den der pletteren jed judisch ich ihr vir zuhn vom vom ermennene den der zich vor zuhöhnt, den der i
		Creditor's h	vame			\$	<u> </u>	☐ Mortgage
								Car
		Number	Street					Credit card
				***************************************	~~~			Loan repayment
								Suppliers or vendors
		City	State	ZiP Code				Other
		***** *** * * * * * * * * * * * * * * *	e communicación de la compania del la compania del la compania del compania de la compania de la	tion to the comment of the concession was	S Secretaria de America de America (Astronomo de Astronomo de Astronomo de Astronomo de Astronomo de Astronomo	en e militare de com dere co in internet i del politico. No income a conserva de principal que disco e de cons	era ara kareka karekanaksarik kalamak eranakan da dan alek biril 4 Mahamanarika alek 1 da male 12 dan alek basi	and the state of an annual form of a state of a state of a state of a state of a state of a state of a state of
		Creditor's N	lama	***************************************		\$	_ \$	☐ Mortgage
		0.03.0.0	aine					☐ Car
		Number 5	Sireal		*****			Credit card
								Loan repayment
					**-			☐ Suppliers or vendors
		City	State	ZIP Code				Other
	response a company and a comp							

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HARRIS

LETISHA DOMINIQUE

Debtor 1

sin 4 waar hafara wan siind	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	rasi maalaa m			h.a lu-14. A
orations of which you are a nt, including one for a busir	any general partners; r an officer, director, pers ness you operate as a s	elatives of any son in control, o	general partners; p r owner of 20% or i	artnerships of which more of their voting	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
n as child support and alimo	ony.				
No Yes, List all payments to an	, incidar				
res, cist an payments to an	Taleider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		** ***********************************	\$	\$	
Number Straet					PORTE NET AND AND AND AND AND AND AND AND AND AND
					NO DESCRIPTION OF THE PROPERTY
City	State ZIP Code		THE THE THE THE PERSON OF THE THE THE THE THE THE THE THE THE THE	MI PERMUNING POLICE OF THE CONTROL OF THE POLICE OF THE PO	
insider's Name			\$	\$	The second secon
Number Street					
Number Street City	State ZIP Code				
City in 1 year before you filed sider? de payments on debts gua	for bankruptcy, did y		ayments or transi	ier any property o	n account of a debt that benefited
City in 1 year before you filed sider? de payments on debts gua	for bankruptcy, did y		Payments or trans Total amount paid	er any property o	
City in 1 year before you filed isider? de payments on debts gua	for bankruptcy, did y	y an insider. Dates of	Total amount	Amount you still	Reason for this payment
City in 1 year before you filed isider? de payments on debts gua to 'es. List all payments that t	for bankruptcy, did y	y an insider. Dates of	Total amount	Amount you still	Reason for this payment
City in 1 year before you filed isider? de payments on debts guallo fes. List all payments that b	for bankruptcy, did y	y an insider. Dates of	Total amount	Amount you still	Reason for this payment
City in 1 year before you filed nsider? de payments on debts guanto ves. List all payments that the linsider's Name	for bankruptcy, did y tranteed or cosigned by benefited an insider.	y an insider. Dates of	Total amount	Amount you still	Reason for this payment
City in 1 year before you filed nsider? de payments on debts guanto ves. List all payments that the linsider's Name	for bankruptcy, did y tranteed or cosigned by benefited an insider.	y an insider. Dates of	Total amount	Amount you still	Reason for this payment

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1 LETIS	-	DOMINIQUE Middle Name	HARRIS	Case number (if known)	
1 13(146)	15	woole Name	Last Name	Section 25 (Nown)	
is 45 Ident	a				
	Ty Le	gal Actions, Repo	essessions, and Forecl	osures	
ist all such ma	oeiore ≥tters,	∍ you nied for bankru Including personal ini	liptcy, were you a party in	any lawsuit, court action, or administrative prons, divorces, collection suits, paternity actions, s	oceeding?
nd contract di	sputes	3.	ary sacco, small claims acti	ons, divorces, collection suits, paternity actions, s	support or custody modifica
Í No					
Yes. Fill in	ihe de	tails.			
			Nature of the case	Court or agency	Status of the cas
Case title					D -
			w	Court Name	Pending
 , , ,			T10.00.		On appeal
Case numb	cr			Number Street	Concluded
o doo nampi				City State ZIP Code	
no televico VII decentrar general processos e con		e en en entre est en la la marina al la la la la la la la la la la la la		City State ZIP Code	one a participal description de descripte \$1,500 a qual tal tal a facilità de la calcalata e
Case title					reconstruction of \$2.5 for \$1.
Od30 atte				Court Name	Pending
					On appeal
Case numbe	er.			Number Street	☐ Concluded
			WATER STATE OF THE	City State ZIP Code	
			Describe the pr	operty Date	Value of the property

Creditor's	Name				\$
				11 N	
Number	Street		Explain what ha	ppened	
				ras repossessed.	
			h	ras foreclosed.	
				as garnished.	
City		State ZIP C	Code Property w	as attached, seized, or levied.	
			Describe the pro	perty Date	Value of the property
					rh.
Creditor's	Name				<u> </u>
Number	Street		Explain what hap		
				as repossessed.	
_			_	as foreclosed.	
City		State ZIP C		as garnished.	
e en en en en en en en en en en en en en		A M. Made an expensive supplier of particles and construction of	□ Property wa	s attached, seized, or levied.	

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Debtor 1	LETISHA First Name	DOMINIQUE Middle Name La	HARRIS	Case number (if known)
11. With	nin 90 days befo	re you filed for bankr	uptcy, did any creditor, includ	ling a bank or financial institution, set off any amounts from your
	onits of refuse	to make a payment b	ecause you owed a debt?	
	vo Yes. Fill in the de	taila		
Wiles 1	os. riii iii me qe	tais.	1848 (1888) (1888) (1888) (1888) (1888) (1888) (1888) (1888) (1888) (1888) (1888) (1888) (1888) (1888) (1888)	and the second s
			Describe the action the cred	Itor took Date action Amount
Č	reditor's Name		and the second s	Was taken
Ñ	lumber Street			<u> </u>
Maria				
ā	iity	State ZIP Code	Make	tion and a to a management of the transformation of the transforma
		State ZIP Code	Last 4 digits of account num	ıber: XXXX
12. Withi	in 1 vear hefore	Vou filed for hankeur	the was any of	to the control of the
credi	itors, a court-ap	pointed receiver, a c	ustodian, or another official?	in the possession of an assignee for the benefit of
2 N				
☐ Y	es			
	3			
Part 5	List Certair	Gifts and Contrib	utions	
13.Withi	n 2 years before	you filed for bankru	ptcy, did you give any gifts wi	th a total value of more than \$600 per person?
₩ N				
back Y	es. Fill in the det	ails for each gift.		
	Riffe swith a tatal s	alue of more than \$600		
Ì	per person	ande of more than \$600	Describe the gifts	Dates you gave Value the gifts
	Control (Control (Con	e per esta de la compansión de la compan	a control de la consigio (se a consigio de control de seguindo de la control de la con	
Pe	erson to Whom You Gr	eve the Gift		\$
10744-				
			-	<u> </u>
Nu	mber Street		-	
Cit	у	State ZIP Code	-	
Do	urnania enlesia e elek-	4		
re	rson's relationship	to you		
OH OH	fio milita - resultant	ue of more than \$600	i. Parisi ali dinangan pangangan pangangan	
pe	rowin a total val r person	ae oranore than \$690	Describe the gifts	Dates you gave Value the gifts
			the second secon	
n.				ę
r'e!	son to Whom You Ga	ve the Gift		<u> </u>
			-	\$
Nur	mber Street			
	wrest			The second secon
City		State ZIP Code		TERRITORIA CONTRACTORIA CONTRAC
				To a second seco
Per	rson's relationship t	o you		TO THE STATE OF TH

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r 1 LETISHA DOMINIQUE First Name Middle Name L	HARRIS Case numb	PET (if known)
Vithin 2 years before you filed for bankr No	ruptcy, did you give any gifts or contributions with a	total value of more than \$600 to any charity?
Yes. Fill in the details for each gift or co	ontribution.	
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you Value contributed
. With Colored District process in the entropy of the approximation of the colored state of t		
Charity's Name	_	\$
		•
	_	Ψ <u></u>
Number Street	_	
City State ZIP Code		
6: List Certain Losses		
	ptcy or since you filed for bankruptcy, did you lose a	
No Yes. Fill in the details. Describe the property you lost and	Describe any insurance coverage for the loss	Date of your Value of property
how the loss occurred	Include the amount that insurance has paid. List pending in claims on line 33 of Schedule A/B: Property.	
		\$
\$ - \$ - Series of District contemporary of the Series Series of the Series of Series of the Series of Seri		
List Certain Payments or Tra	The second state of the se	$m_1, m_2, m_3, m_4, m_5, m_4, m_4, m_4, m_4, m_4, m_4, m_4, m_4$
	otcy, did you or anyone else acting on your behalf pa	
u consumed about seeking bankruptcy	or preparing a bankruptcy petition?	
sude any attorneys, bankruptcy petition pr	reparers, or credit counseling agencies for services requ	uired in your bankruptcy.
Yes. Fili in the details.		
	Description and value of any property transferred	Date payment or Amount of paymen
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	Table to the state of the state	
Person Who Made the Payment, if Not You		

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	Description and value of any property transferred	Date payment or Amoun transfer was made paymen	retribed to reserve
Person Who Was Paid			
Number Street	# 1	5	
		\$ 	
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City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			
mised to help you deal with your cred not include any payment or transfer that had been solved in the details.	otcy, did you or anyone else acting on your behalf p litors or to make payments to your creditors? you listed on line 16.		
Yes. Fill In the details.	Description and value of any property transferred	Date payment or Amount transfer was	of payı
Person Who Was Paid		made	
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Debtor 1	LETISHA First Name	DOMINIQUE Missolie Name La	HARRIS est Name	Case number (if known)	
19. Wit h	nin 10 years befo	ore you filed for hank	Funtov did vou transfer anu	r property to a self-settled trust or similar device of which	
are	a beneficiary? (These are often called	asset-protection devices.)	property to a self-settled trust or similar device of which	1 you
	No Yes. Fill in the de				
Name:	res. Filt in the DE	taiis,			Santalana (A. Conta A. I. a. I. a. I. a. I. a. I. a. I. a. I. a. I. a. I. a. I. a. I. a. I. a. I. a. I. a. I. a
			Description and value of the	ne property transferred	Date transfer was made
					was made
Î	Name of trust				
					
Part 8	List Certain	Financial Accoun	ts, Instruments. Safe De	eposit Boxes, and Storage Units	
20. With				ounts or instruments held in your name, or for your bene	.e:4
0103	ee, acia, moved	, or transferred?			
brok	ide checking, si ierage houses, j	avings, money marke pension funds, coope	i, or other financial account ratives, associations, and o	s; certificates of deposit; shares in banks, credit unions,	,
	ło		,		
Farmer A	es. Fill in the de	etails.			
			Last 4 digits of account nu		it balance before sing or transfer
				Or transferred	
	Name of Financial In	stitution	XXXX	_ Checking s	
	Number Street		-	Savings	
			-	Money market	
	City	State ZiP Code		Brokerage	
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į	Name of Financial In	titution	XXXX	Checking \$	
				☐ Savings	
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č	City	State ZIP Code		□ Other	
21. Do yo	ou now have, or	did you have within 1	year before you filed for ba	ankruptcy, any safe deposit box or other depository for	
secui Mai N	mues, cash, or o	ther valuables?			
	es. Fill in the de	talls.			
			Who else had access to it?	Describe the contents	Do you still
			ere i na ministrata i na e rede ja de ged a i makanet ele billioglej tribe		have it?
K	lame of Financial ins	titution	Name		☐ No ☐ Yes
ísi	lumber Street				The second secon
			Number Street		The state of the s
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С	ity	State ZIP Code			Ì

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or 1 LETISHA	DOMINIQUE	HARRIS	C	ase number (iFknown)		
First Name	Middle Name (Last Name				
lisua unu etarari aran	entrin a atawara un	it == wlass = 4th == 4th ==				·
No	erty in a storage un	nt or place other than yo	ur nome within 1 ye	ar before you filed for bar	nkruptcy?	
Yes. Fill in the det	tails.					
		Who else has or had a	occess to it?	Describe the contents		Do you stili
						have it?
						□ No
Name of Storage Fac	ility	Name		_		☐ Yes
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white state		Number Street		744		
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incal Identify F	roperty You Hol	d or Control for Some	one Else			
The second secon	4.00.11.					
or hold in trust for se	or any property mai	t someone else owns? In	iciude any property	you borrowed from, are s	storing for,	
U No						
A Yes. Fill in the de	tails.					
		Where is the property?		Describe the property	V	ilue
				gen coming de agendo medies de l'Enderthe Medied (Medied (1753) d'Alberta (1753)	Hardward dander of plants are a beautiful and a second and a second are a second as a second are a second are a	Washington (1911)
Owner's Name	7-7					
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Z		o, or other parties.		
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Part 1	間 組 Sign Belo	*14/		
∦h ≉n	ave read the ans	swers on this <i>Stateme</i>	nt of Financial Affairs and	any attachments, and I declare under penalty of perjury that the tement, concealing property, or obtaining money or property by fraud
in	connection with	a bankruptcy case ca	n result in fines up to \$25	0,000, or imprisonment for up to 20 years, or both.
16	U.S.C. 99 132, 1	341, 1519, and 3571.	9	
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À	10000		<u> </u>	
	Signature of Deb	tor1	Signatu	re of Debtor 2
	Date 2/14/1	<u> </u>	Date	
Di	d you attach add	ditional pages to Your	Statement of Financial Aft	airs for Individuals Filing for Bankruptcy (Official Form 107)?
Y	No			
	Yes			
		ree to pay someone wh	o is not an attorney to he	p you fill out bankruptcy forms?
	No	_{erson} VERNICE WA	RREN W	
42	res. wame of p	erson - LIGHOL WA	With the second	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).